

STATE OF MINNESOTA

NINETY-FIRST SESSION — 2019

 FIFTEENTH DAY

SAINT PAUL, MINNESOTA, MONDAY, FEBRUARY 25, 2019

The House of Representatives convened at 3:30 p.m. and was called to order by Melissa Hortman, Speaker of the House.

Prayer was offered by the Reverend David Colby, Central Presbyterian Church, St. Paul, Minnesota.

The members of the House gave the pledge of allegiance to the flag of the United States of America.

The roll was called and the following members were present:

| | | | | | |
|-------------|------------|-----------------|-----------|------------|--------------|
| Acomb | Dehn | Hassan | Lien | Nelson | Schultz |
| Albright | Demuth | Hausman | Lillie | Neu | Scott |
| Anderson | Dettmer | Heinrich | Lippert | Noor | Stephenson |
| Bahner | Drazkowski | Heintzeman | Lislegard | Nornes | Sundin |
| Bahr | Ecklund | Her | Loeffler | O'Driscoll | Swedzinski |
| Baker | Edelson | Hertaus | Long | Olson | Tabke |
| Becker-Finn | Elkins | Hornstein | Lucero | O'Neill | Theis |
| Bennett | Erickson | Howard | Lueck | Petersburg | Torkelson |
| Bernardy | Fabian | Huot | Mahoney | Pierson | Urdahl |
| Bierman | Fischer | Johnson | Mann | Pinto | Vang |
| Boe | Freiberg | Jurgens | Mariani | Poppe | Vogel |
| Brand | Garofalo | Klevorn | Marquart | Poston | Wagenius |
| Cantrell | Gomez | Koegel | Masin | Pryor | Wazlawik |
| Carlson, A. | Green | Kotyza-Witthuhn | McDonald | Quam | West |
| Carlson, L. | Grossell | Koznick | Mekeland | Richardson | Winkler |
| Christensen | Gruenhagen | Kresha | Moller | Robbins | Wolgamott |
| Clafin | Gunther | Kunesh-Podein | Moran | Runbeck | Xiong, J. |
| Considine | Haley | Layman | Morrison | Sandell | Xiong, T. |
| Daniels | Halverson | Lee | Munson | Sandstede | Youakim |
| Daudt | Hamilton | Lesch | Murphy | Sauke | Zerwas |
| Davids | Hansen | Liebling | Nash | Schomacker | Spk. Hortman |

A quorum was present.

Backer, Davnie, Franson, Kiel, Miller, Pelowski and Persell were excused.

The Chief Clerk proceeded to read the Journal of the preceding day. There being no objection, further reading of the Journal was dispensed with and the Journal was approved as corrected by the Chief Clerk.

REPORTS OF STANDING COMMITTEES AND DIVISIONS

Moran from the Committee on Health and Human Services Policy to which was referred:

H. F. No. 85, A bill for an act relating to health; requiring the Emergency Medical Services Regulatory Board to propose guidelines authorizing patient-assisted medication administration.

Reported the same back with the following amendments:

Page 1, line 6, after "ADMINISTRATION" insert "IN EMERGENCIES"

Page 1, delete lines 17 to 21

Page 2, line 1, delete "(c)" and insert "(b)"

Amend the title as follows:

Page 1, line 3, after "administration" insert "in emergencies"

With the recommendation that when so amended the bill be placed on the General Register.

The report was adopted.

Moran from the Committee on Health and Human Services Policy to which was referred:

H. F. No. 90, A bill for an act relating to health; modifying the health care bill of rights and the home care bill of rights; modifying home care licensing provisions; modifying the powers and duties of the director of the Office of Health Facility Complaints; modifying house with services registration requirements; clarifying assisted living title protection; modifying consumer protection for vulnerable adults; modifying the Vulnerable Adults Act; establishing task forces; requiring reports; amending Minnesota Statutes 2018, sections 144.6501, subdivision 3, by adding a subdivision; 144.651, subdivisions 1, 2, 4, 6, 14, 16, 17, 20, 21, by adding a subdivision; 144.652, by adding a subdivision; 144A.10, subdivision 1; 144A.441; 144A.442; 144A.45, subdivisions 1, 2; 144A.474, subdivisions 8, 9, 11; 144A.479, by adding a subdivision; 144A.4791, subdivision 10; 144A.53, subdivisions 1, 4, by adding subdivisions; 144D.01, subdivision 1; 144D.02; 144D.04, subdivision 2, by adding a subdivision; 144D.09; 144G.01, subdivision 1; 325F.71; 609.2231, subdivision 8; 626.557, subdivisions 3, 4, 9a, 9b, 9c, 12b, 14, 17; proposing coding for new law in Minnesota Statutes, chapters 144; 144D; 144G; repealing Minnesota Statutes 2018, section 144A.479, subdivision 2.

Reported the same back with the following amendments:

Delete everything after the enacting clause and insert:

"ARTICLE 1 ASSISTED LIVING AND HOME CARE RIGHTS AND CONSUMER PROTECTIONS

Section 1. [144J.01] DEFINITIONS.

Subdivision 1. **Applicability.** For the purposes of this chapter, the following terms have the meanings given them unless the context clearly indicates otherwise.

Subd. 2. **Adult.** "Adult" means a person who is at least 18 years of age.

Subd. 3. **Affiliated home care provider.** "Affiliated home care provider" means a home care provider licensed under chapter 144A that provides home care services to residents of an assisted living establishment under a business relationship or other affiliation with the establishment.

Subd. 4. **Agent.** "Agent" means an employee of, or person or entity contracting or affiliated with, the assisted living establishment.

Subd. 5. **Assisted living contract.** "Assisted living contract" means the legal agreement between an assisted living establishment and a resident for the provision of:

(1) housing;

(2) home care services, whether directly or through an affiliated home care provider; and

(3) any other services.

Subd. 6. **Assisted living establishment.** (a) "Assisted living establishment" means an entity that is governed under chapter 144G or, after July 1, 2020, is licensed by the commissioner of health to provide housing and offer or provide home care services directly or through an affiliated home care provider. For the purposes of this chapter, unless otherwise provided, an assisted living establishment also includes a housing with services establishment registered under chapter 144D.

(b) Assisted living establishment does not include:

(1) shelters, transitional housing, or any other residential units serving exclusively or primarily homeless individuals, as defined in section 116L.361;

(2) a nursing home licensed under chapter 144A;

(3) a hospital, as defined in section 144.50, subdivision 2;

(4) a boarding care home, as defined in Minnesota Rules, part 4655.0100, subpart 3;

(5) a supervised living facility, as defined in Minnesota Rules, part 4665.0100, subpart 10;

(6) a board and lodging establishment licensed under chapter 157 or 245G or governed under Minnesota Rules, parts 9520.0500 to 9520.0670;

(7) any establishment that serves as a shelter for battered women or other similar purpose;

(8) adult foster care licensed by the Department of Human Services;

(9) private homes in which the residents are related to the providers of services by kinship, law, or affinity;

(10) residential settings for persons with developmental disabilities in which the services are licensed under chapter 245D;

(11) a home-sharing arrangement, including but not limited to arrangements where an older person, person with a disability, or single-parent family makes lodging in a private residence available to another person in exchange for services or rent, or both;

(12) a condominium, cooperative, common interest community, or owners' association organized under chapter 515B where at least 80 percent of the units that comprise the condominium, cooperative, common interest community, or association are occupied by individuals who are the owners, members, or shareholders of the units;

(13) services for persons with developmental disabilities that are provided under a license under chapter 245D; or

(14) a temporary family health care dwelling as defined in section 394.307, subdivision 1.

Subd. 7. **Client.** "Client" means a person to whom an unaffiliated home care provider provides home care services under a home care contract.

Subd. 8. **Commissioner.** "Commissioner" means the commissioner of health.

Subd. 9. **Designated representative.** "Designated representative" means:

(1) a court-appointed guardian;

(2) a conservator;

(3) an attorney-in-fact;

(4) a health care agent, as defined in section 145C.01, subdivision 2; or

(5) a person designated in writing by the resident and identified in the resident's records on file with the assisted living establishment.

Subd. 10. **Home care provider.** "Home care provider" means an affiliated or unaffiliated home care provider.

Subd. 11. **Home care service agreement or service agreement.** "Home care service agreement" or "service agreement" means the written plan described in section 144A.43, subdivision 27, between the home care client or the client's designated representative and an unaffiliated home care provider describing the home care services that will be provided to the client.

Subd. 12. **Home care services.** "Home care services" means:

(1) the basic home care services described in section 144A.471, subdivision 6, clauses (1) to (5);

(2) the comprehensive home care services described in section 144A.471, subdivision 7;

(3) monitoring or supervising the resident's functioning and needs to ensure the resident's well-being;

(4) assistance with laundry, shopping, and household chores;

(5) housekeeping services;

(6) providing assistance with meals or food preparation;

(7) help with arranging for or providing transportation to medical, social, recreational, personal, or social service appointments; or

(8) social or recreational services.

Subd. 13. Housing with services establishment. "Housing with services establishment" has the meaning given in section 144D.01, subdivision 4.

Subd. 14. Resident. "Resident" means a person living in an assisted living establishment.

Subd. 15. Unaffiliated home care provider. "Unaffiliated home care provider" means a home care provider regularly engaged for a fee in the delivery of one or more home care services directly to a client in any setting, including to a resident of an assisted living establishment, provided the home care provider has no business relationship or affiliation with the assisted living establishment where the client contracting for or receiving home care services resides.

EFFECTIVE DATE. This section is effective August 1, 2019.

Sec. 2. [144J.02] ASSISTED LIVING CONTRACTS.

Subdivision 1. Contract required. (a) No assisted living establishment may offer or provide housing, home care services, or other services to a resident unless it has executed a written contract with the resident.

(b) The contract must:

(1) be signed by both:

(i) the resident or the resident's designated representative; and

(ii) the owner or owners, or an agent of the owner or owners, of the assisted living establishment;

(2) contain all the terms concerning the provision of:

(i) housing; and

(ii) services, including all home care services, whether provided directly by the assisted living establishment or by an affiliated home care provider.

(c) An assisted living establishment must:

(1) offer to prospective residents and provide to the Office of the Ombudsman for Long-Term Care a complete unsigned copy of its assisted living contract; and

(2) give a complete copy of any signed contract and any addendums, and all supporting documents and attachments, to the resident or the resident's designated representative promptly after a contract and any addendum has been signed by the resident or the resident's designated representative.

(d) A contract under this section is a consumer contract under sections 325G.29 to 325G.37.

(e) Before or at the time of execution of an assisted living contract, the assisted living establishment must offer the resident the opportunity to identify a designated representative in writing in the contract. The contract must contain a page or space for the name and contact information of the designated representative and a box the resident

must initial if the resident declines to name a designated representative. Notwithstanding paragraph (f), the resident has the right at any time to rescind the declination or add or change the name and contact information of the designated representative.

(f) The resident must agree in writing to any additions or amendments to the contract. Upon agreement between the resident or resident's designated representative and the assisted living establishment, a new contract or an addendum to the existing contract must be executed and signed.

Subd. 2. Contents of contract; contact information. (a) An assisted living contract must include in a conspicuous place and manner on the contract, the legal name, the license or registration number of the assisted living establishment, and the license number of any affiliated home care provider.

(b) An assisted living contract must include the name, telephone number, and physical mailing address, which may not be a public or private post office box, of:

(1) the assisted living establishment and any affiliated home care provider;

(2) the owner or owners of the assisted living establishment and of any affiliated home care provider;

(3) the managing agent of the assisted living establishment; and

(4) at least one natural person who is authorized to accept service of process on behalf of the assisted living establishment and each affiliated home care provider.

Subd. 3. Duration of contract. An assisted living contract must include:

(1) a description of all the terms and conditions of the contract, including a description of and any limitations to the housing and home care services to be provided for the contracted amount;

(2) a delineation of the cost and nature of any other services to be provided for an additional fee;

(3) a delineation and description of any additional fees the resident may be required to pay if the resident's condition changes during the term of the contract;

(4) a delineation of the grounds under which the resident may be discharged, evicted, or transferred or have services terminated; and

(5) billing and payment procedures and requirements.

Subd. 4. Complaint procedures. An assisted living contract must include a description of the assisted living establishment's complaint resolution process available to residents, including the name and contact information of the person representing the assisted living establishment who is designated to handle and resolve complaints.

Subd. 5. Notice required. An assisted living contract must include a clear and conspicuous notice of:

(1) the right under section 144J.13 to challenge a discharge, eviction, or transfer or service termination;

(2) the assisted living establishment's policy regarding transfer of residents within the establishment, under what circumstances transfer may occur, and whether or not consent of the resident being asked to transfer is required;

(3) the toll-free complaint line for the long-term care ombudsman and the Office of Health Facility Complaints;

(4) the resident's right to obtain services from an unaffiliated home care provider;

(5) the availability of public funds for eligible residents to pay for housing or services, or both; and

(6) the contact information to obtain long-term care consulting services under section 256B.0911.

Subd. 6. Contracts in permanent files. Assisted living contracts and related documents executed by each resident or the resident's designated representative must be maintained by the assisted living establishment in files from the date of execution of the assisted living contract until three years after the contract is terminated or expires. Assisted living contracts and any applicable written disclosures required under section 325F.72 shall be made available for on-site inspection by the commissioner upon request at any time.

Subd. 7. Waivers of liability prohibited. An assisted living contract must not include a waiver of assisted living establishment liability for the health and safety or personal property of a resident. An assisted living contract must not include any provision that the assisted living establishment knows or should know to be deceptive, unlawful, or unenforceable under state or federal law, nor include any provision that requires or implies a lesser standard of care or responsibility than is required by law.

EFFECTIVE DATE. This section is effective for all assisted living contracts entered into on or after January 1, 2020. Prior to January 1, 2020, assisted living establishments are governed by the contract requirements in Minnesota Statutes, sections 144D.04 and 144D.045.

Sec. 3. [144J.03] HOUSING AND SERVICE-RELATED MATTERS.

Subdivision 1. Responsibility for housing and services. The assisted living establishment is directly responsible to the resident for all housing and service-related matters provided directly or through an affiliated home care provider. Housing and service-related matters include but are not limited to the handling of complaints, the provision of notices, and the initiation of any adverse action against the resident involving housing or services provided by the assisted living establishment or any agent, including an affiliated home care provider.

Subd. 2. Uniform checklist disclosure of services. (a) On and after July 1, 2020, an assisted living establishment must provide to prospective residents, the prospective resident's designated representative, and any other person or persons the resident chooses:

(1) a written checklist listing all services permitted under the assisted living establishment's license and identifying all services the assisted living establishment offers to provide under the assisted living contract; and

(2) an oral explanation of the services offered under the assisted living contract.

(b) The requirements of paragraph (a) must be completed prior to the execution of an assisted living contract.

(c) The commissioner must, in consultation with all interested stakeholders, design the uniform checklist disclosure form for use as provided under paragraph (a).

Subd. 3. Reservation of rights. Nothing in this chapter or chapter 144I:

(1) requires a resident to utilize any service provided by or through, or made available in, an assisted living establishment;

(2) prevents an assisted living establishment from requiring, as a condition of the assisted living contract, that the resident pay for a package of services even if the resident does not choose to utilize all or some of the services in the package;

(3) requires an assisted living establishment to fundamentally alter the nature of the operations of the establishment in order to accommodate a resident's request; or

(4) affects the duty of an assisted living establishment to grant a resident's request for reasonable accommodations.

Sec. 4. **[144J.04] NOTICE TO RESIDENTS OF CHANGE IN OWNERSHIP OR MANAGEMENT.**

An assisted living establishment must provide prompt written notice to the resident or resident's designated representative of any change of legal name, telephone number, and physical mailing address, which may not be a public or private post office box, of:

(1) the owner or owners of the assisted living establishment or affiliated home care provider or, after July 1, 2020, the assisted living establishment or affiliated home care provider or housing with services registrant, if different from the owner or owners of the assisted living establishment;

(2) the manager of the assisted living establishment; and

(3) the natural person authorized to accept legal process on behalf of the assisted living establishment or affiliated home care provider.

EFFECTIVE DATE. This section is effective August 1, 2019.

Sec. 5. **[144J.05] NOTICES IN PLAIN LANGUAGE AND LANGUAGE ACCOMMODATIONS.**

Assisted living establishments and affiliated home care providers must provide all notices in plain language that residents can understand and make reasonable accommodations for residents who have communication disabilities and those whose primary language is a language other than English.

EFFECTIVE DATE. This section is effective August 1, 2019.

Sec. 6. **[144J.06] ASSISTED LIVING AND HOME CARE RIGHTS.**

Subdivision 1. **Definitions.** (a) "Assisted living establishment" includes an affiliated home care provider.

(b) "Maltreatment" means conduct described in section 626.5572, subdivision 15, or the intentional and nontherapeutic infliction of physical pain or injury, or any persistent course of conduct intended to produce mental or emotional distress.

(c) "Resident" means a person residing in an assisted living establishment or any person receiving home care services from an affiliated or unaffiliated home care provider.

Subd. 2. **Applicability.** All home care providers, including those exempted from home care licensure under section 144A.471, subdivision 8, must comply with this section and the commissioner shall enforce this section against home care providers exempt from licensure in the same manner as for licensees.

Subd. 3. Legislative intent. It is the intent of the legislature to promote the interests and well-being of residents. It is the intent of this section that every resident's civil and religious liberties, including the right to independent personal decisions and knowledge of available choices, shall not be infringed and that the assisted living establishment or home care provider must encourage and assist in the fullest possible exercise of these rights. The rights established under this section for the benefit of residents do not limit the rights residents have under other applicable law.

Subd. 4. Right to information about rights. (a) Before receiving services, residents have the right to receive from the assisted living establishment or unaffiliated home care provider written information about rights under this section in plain language and in terms residents can understand. The provider must make reasonable accommodations for residents who have communication disabilities and those who speak a language other than English. The information must include:

(1) what recourse the resident has if rights are violated;

(2) the name, address, telephone number, and e-mail contact information of organizations that provide advocacy and legal services for residents to enforce their rights including but not limited to the designated protection and advocacy organization in Minnesota that provides advice and representation to individuals with disabilities; and

(3) the name, address, telephone number, and e-mail contact information for government agencies where the resident or private client may file a maltreatment report, complain, or seek assistance, including the Office of Health Facility Complaints, the long-term care ombudsman, and state and county agencies that regulate assisted living establishments and home care providers.

(b) Upon request, residents and their designated representatives have the right to current assisted living establishment or home care provider policies, inspection findings of state and local health authorities, and further explanation of the rights provided under this section, consistent with chapter 13 and section 626.557.

Subd. 5. Right to courteous treatment. Residents have the right to be treated with courtesy and respect, and to have the resident's property treated with respect.

Subd. 6. Right to appropriate care and services. (a) Residents have the right to care and services that are appropriate based on the resident's needs and according to an up-to-date plan for care and services. All plans for care and services must be designed to enable residents to achieve their highest level of emotional, psychological, physical, medical, and functional well-being and safety.

(b) Residents have the right to receive medical and personal care and services with continuity by people who are properly trained and competent to perform their duties and in sufficient numbers to adequately provide the services agreed to in the assisted living contract or home care service agreement.

Subd. 7. Right to information about individuals providing services. Residents have the right to be told before receiving services the type and disciplines of staff who will be providing the services, the frequency of visits proposed to be furnished, and other choices that are available for addressing the resident's needs.

Subd. 8. Freedom from maltreatment. Residents have the right to be free from maltreatment.

Subd. 9. Right to participate in care and service planning; notice of change. Residents have the right to actively participate in the planning, modification, and evaluation of their care and services. This right includes:

(1) the opportunity to discuss care, services, treatment, and alternatives with the appropriate caregivers;

(2) the opportunity to request and participate in formal care conferences;

(3) the right to include a family member or the resident's designated representative, or both; and

(4) the right to be told in advance of, and take an active part in decisions regarding, any recommended changes in the plan for care and services.

Subd. 10. Right to disclosure of contract services and rights to purchase outside services. (a) Residents have the right to be informed, prior to receiving care or services from an affiliated or unaffiliated home care provider and during their stay in an assisted living establishment of:

(1) care and services which are included under the terms of the assisted living contract and the home care service agreement, if applicable;

(2) information about care and other public services or private services that may be available in the community at additional charges; and

(3) any limits to the services available from the assisted living establishment or an unaffiliated home care provider.

(b) If an assisted living contract or home care service agreement permits changes in services, residents have the right to reasonable, advance notice of any change.

(c) Residents have the right to purchase or rent goods or services not included in the assisted living contract rate or home care service agreement rate from a supplier of their choice unless otherwise provided by law. The supplier must ensure that these purchases are sufficient to meet the medical or treatment needs of the residents.

(d) Residents have the right to change home care providers after services have begun, within the limits of health insurance, long-term care insurance, medical assistance, or other health programs, and contractual agreements.

(e) Home care providers must make every effort to assist residents in obtaining information regarding whether the Medicare, medical assistance, or other public program will pay for any or all of the services.

Subd. 11. Right to information about charges. (a) Before services are initiated, residents have the right to be notified:

(1) of home care provider charges for the services;

(2) as to what extent payment may be expected from health insurance, public programs, or other sources, if known; and

(3) what charges the resident may be responsible for paying.

(b) If an assisted living contract or home care service agreement permits changes in charges, residents have the right to reasonable, advance notice of any change.

Subd. 12. Right to information about health care treatment. Where applicable, residents have the right to be given by their physicians complete and current information concerning their diagnosis, cognitive functioning level, treatment, alternatives, risks, and prognosis as required by the physician's legal duty to disclose. This information must be in terms and language the residents can reasonably be expected to understand. This information shall

include the likely medical or major psychological results of the treatment and its alternatives. Residents receiving home care services from the assisted living establishment directly, or through an affiliated home care provider, may be accompanied by a family member or other designated representative, or both.

Subd. 13. Right to refuse services or care. (a) Residents have the right to refuse services or care.

(b) Home care providers and assisted living establishments must document in the resident's record that the home care provider informed residents who refuse care, services, treatment, medication, or dietary restrictions of the likely medical, health-related, or psychological consequences of the refusal.

(c) In cases where a resident is incapable of understanding the circumstances but has not been adjudicated incompetent, or when legal requirements limit the right to refuse medical treatment, the conditions and circumstances must be fully documented by the attending physician in the resident's record.

Subd. 14. Right to personal, treatment, and communication privacy. (a) In assisted living establishments, residents have the right to:

(1) every consideration of their privacy, individuality, and cultural identity as related to their social, religious, and psychological well-being. Staff must respect the privacy of a resident's space by knocking on the door and seeking consent before entering, except in an emergency or where clearly inadvisable;

(2) respectfulness and privacy as they relate to the resident's medical and personal care program. Case discussion, consultation, examination, and treatment are confidential and must be conducted discreetly. Privacy must be respected during toileting, bathing, and other activities of personal hygiene, except as needed for resident safety or assistance;

(3) communicate privately with persons of their choice;

(4) enter and, if not residing in a secure assisted living establishment, leave the facility as they choose;

(5) private communication with a representative of a protection and advocacy services agency; and

(6) access Internet service at their expense, unless offered by the home care provider or assisted living establishment.

(b) Personal mail must be sent by the assisted living establishment without interference and received unopened unless medically or programmatically contraindicated and documented by the physician or advanced practice registered nurse in the resident's record. Residents must be provided access to a telephone to make and receive calls as well as speak privately. Assisted living establishments that are unable to provide a private area must make reasonable arrangements to accommodate the privacy of residents' calls.

Subd. 15. Right to confidentiality of records. Residents have the right to have personal, financial, and medical information kept private, to approve or refuse release of information to any outside party, and to be advised of the assisted living establishment and home care providers' policies and procedures regarding disclosure of the information. Residents must be notified when personal records are requested by any outside party.

Subd. 16. Right to visitors and social participation. (a) Residents have the right of reasonable access at reasonable times, or any time when the resident's welfare is in immediate jeopardy, to any available rights protection services and advocacy services.

(b) Residents have the right to meet with or receive visits at reasonable times by the resident's guardian, conservator, health care agent, family, attorney, advocate, religious or social work counselor, or any person of the resident's choosing, or at any time when the resident's welfare is in immediate jeopardy.

(c) Residents have the right to participate in commercial, religious, social, community, and political activities without interference and at their discretion if the activities do not infringe on the right to privacy of other residents.

Subd. 17. Right to designate representative. Residents have the right to name a designated representative. Before or at the time of execution of an assisted living contract, assisted living establishments must offer the resident the opportunity to identify a designated representative in writing in the contract. Residents have the right at any time at or after they enter into an assisted living contract to name a designated representative.

Subd. 18. Right to form family and advisory councils. Residents in assisted living establishments and their families have the right to organize, maintain, and participate in resident family and advisory councils. Assisted living establishments must provide assistance and space for meetings and afford privacy. Staff or visitors may attend only upon the council's invitation. A staff person must be designated the responsibility of providing this assistance and responding to written requests that result from council meetings. Resident and family councils must be encouraged to make recommendations regarding establishment policies.

Subd. 19. Right to complain. Residents have the right to:

- (1) complain or inquire about either care or services that are provided or not provided;
- (2) complain about the lack of courtesy or respect to the resident or to the resident's property;
- (3) know how to contact the agent of the assisted living establishment or unaffiliated home care provider who is responsible for handling complaints and inquiries;
- (4) have the assisted living establishment or the unaffiliated home care provider conduct an investigation, attempt to resolve, and provide a timely response to the complaint or inquiry; and
- (5) recommend changes in policies and services to staff and others of their choice.

Subd. 20. Right to assert rights. Residents, their designated representatives, or any person or persons on behalf of the resident have the right to assert the rights granted to residents under this section or any other section.

EFFECTIVE DATE. This section is effective August 1, 2019.

Sec. 7. [144J.07] ELECTRONIC MONITORING.

Subdivision 1. Definitions. (a) For the purposes of this section, the following terms have the meanings given them.

(b) "Electronic monitoring device" means a camera or other device that captures, records, or broadcasts audio, video, or both, that is placed in a resident's room or private living space and is used to monitor the resident or activities in the room or private living space.

(c) "Facility" means a facility that is:

- (1) licensed as a nursing home under chapter 144A;
- (2) licensed as a boarding care home under sections 144.50 to 144.56; or

(3) an assisted living establishment, as defined in section 144J.01, subdivision 6.

(d) "Resident" means a person 18 years of age or older residing in a facility.

(e) "Resident representative" means a court-appointed guardian, health care agent under section 145C.01, subdivision 2, or a person chosen by the resident and identified in the resident's records on file with the facility.

Subd. 2. Electronic monitoring authorized. (a) A facility must allow a resident or a resident representative to conduct electronic monitoring of the resident's room or private living space as provided in this section.

(b) Nothing in this section precludes the use of electronic monitoring of health care allowed under other law.

Subd. 3. Consent on behalf of a resident. (a) If the resident has not affirmatively objected to electronic monitoring and the resident's health care provider determines that the resident lacks the ability to understand and appreciate the nature and consequences of electronic monitoring, the resident representative may consent on behalf of the resident, subject to paragraph (b). For purposes of this subdivision, a resident affirmatively objects when the resident orally, visually, or through the use of auxiliary aids or services declines electronic monitoring.

(b) Prior to a resident representative consenting on behalf of a resident, the resident must be asked by the resident representative if the resident wants electronic monitoring to be conducted. The resident representative must explain to the resident:

(1) the reason for placing the electronic monitoring device;

(2) the type of electronic monitoring device to be used;

(3) that the resident may place conditions on the electronic monitoring device's use, as provided under subdivision 7, paragraph (a), clause (6);

(4) with whom the recording may be shared under this section; and

(5) the resident's ability to decline all recording.

The resident's response must be documented on the notification and consent form.

(c) A resident may set conditions for use of the electronic monitoring device, including the list of standard conditions provided under subdivision 7, paragraph (a), clause (6).

(d) A resident may request that the electronic monitoring device be turned off or the visual or audio recording component of the electronic monitoring device be blocked at any time.

(e) A resident may withdraw the consent made on the resident's behalf at any time by affirmatively objecting to the monitoring.

Subd. 4. Roommate consent. (a) Prior to implementing electronic monitoring, a resident or a resident representative must obtain the written consent on the notification and consent form of any other resident residing in the room or private living space.

(b) If the roommate has not affirmatively objected to the electronic monitoring in accordance with this subdivision and the roommate's physician determines that the roommate lacks the ability to understand and appreciate the nature and consequences of electronic monitoring, the roommate's resident representative may consent on behalf of the roommate. The roommate and the roommate's resident representative must be told:

(1) the reason for placing the electronic monitoring device;

(2) the type of electronic monitoring device to be used;

(3) that they can place conditions on the electronic monitoring device's use, including those listed under subdivision 7, paragraph (a), clause (6);

(4) with whom the recording may be shared under this section; and

(5) their ability to decline all recording.

(c) A roommate or roommate's resident representative may consent to electronic monitoring with any conditions of the roommate's choosing, including the list of standard conditions listed under subdivision 7, paragraph (a), clause (6). A roommate may request that the visual or audio recording component of the electronic monitoring device be disabled or blocked at any time.

(d) The roommate or roommate's resident representative may withdraw consent at any time by submitting written notice to the facility.

(e) Any resident currently conducting electronic monitoring must obtain consent from any new roommate before the resident continues authorized electronic monitoring. If a new roommate does not consent to electronic monitoring and the resident conducting the electronic monitoring does not remove the electronic monitoring device, the facility must remove the electronic monitoring device.

Subd. 5. Reasonable accommodation. (a) If a resident of a facility who is residing in a shared room wants to conduct electronic monitoring and another resident living in or moving into the same shared room refuses to consent to the use of an electronic monitoring device, the facility must make a reasonable attempt to accommodate the resident who wants to conduct electronic monitoring. A facility has met the requirement to make a reasonable attempt when upon notification that a roommate has not consented to the use of an electronic monitoring device in the resident's room, the facility offers to move the resident to another shared room that is available at the time of the request.

(b) If a resident chooses to reside in a private room in a facility in order to accommodate the use of an electronic monitoring device, the resident must pay the private room rate. If a facility is unable to accommodate a resident due to lack of space, the facility must reevaluate the request every two weeks until the request is fulfilled. Notwithstanding any other provision of this chapter, a facility is not required to provide a private room or a single-bed room to a resident who is not a private-pay resident.

Subd. 6. Notice of monitoring to the facility; exceptions to required notice. (a) Electronic monitoring may begin only after the resident or resident representative who intends to place an electronic monitoring device completes and submits to the facility a notification and consent form prescribed by the commissioner.

(b) Notwithstanding paragraph (a), the resident or resident representative who intends to place an electronic monitoring device may do so without submitting a notification and consent form to the facility:

(1) for up to 30 days if the resident or the resident representative reasonably fears retaliation against the resident by the facility and timely submits a Minnesota Adult Abuse Reporting Center report or police report, or both, upon evidence from the electronic monitoring device that suspected maltreatment has occurred;

(2) for up to 30 days if there has not been a timely written response from the facility to a written communication from the resident or resident representative expressing a concern prompting the desire for placement of an electronic monitoring device; or

(3) for up to 30 days if the resident or resident representative has already submitted a Minnesota Adult Abuse Reporting Center report or police report regarding the resident's concerns prompting the desire for placement.

Subd. 7. Notification and consent form requirements. (a) The notification and consent form must include, at a minimum, the following information:

(1) the resident's signed consent to electronic monitoring or the signature of the resident representative, if applicable. If the resident representative signs the consent form, the form must document the following:

(i) the date the resident was asked if the resident wants electronic monitoring to be conducted;

(ii) who was present when the resident was asked; and

(iii) an acknowledgment that the resident did not affirmatively object;

(2) the resident's roommate's signed consent or the signature of the roommate's resident representative, if applicable. If a roommate's resident representative signs the consent form, the form must document the following:

(i) the date the roommate was asked if the roommate consents to electronic monitoring;

(ii) who was present when the roommate was asked; and

(iii) an acknowledgment that the roommate did not affirmatively object;

(3) the type of electronic monitoring device to be used;

(4) any installation needs, including the mounting of a device to a wall or ceiling;

(5) the proposed date of installation for scheduling purposes;

(6) a list of standard conditions or restrictions that the resident or a roommate may elect to place on the use of the electronic monitoring device including but not limited to:

(i) prohibiting audio recording;

(ii) prohibiting video recording;

(iii) prohibiting broadcasting of audio or video;

(iv) turning off the electronic monitoring device or blocking the visual recording component of the electronic monitoring device for the duration of an exam or procedure by a health care professional;

(v) turning off the electronic monitoring device or blocking the visual recording component of the electronic monitoring device while dressing or bathing is performed; and

(vi) turning off the electronic monitoring device for the duration of a visit with a spiritual adviser, ombudsman, attorney, financial planner, intimate partner, or other visitor;

(7) any other condition or restriction elected by the resident or roommate on the use of an electronic monitoring device;

(8) a signature box for documenting that the resident or roommate has withdrawn consent; and

(9) a statement of the circumstances under which a recording may be disseminated under subdivision 10.

(b) Subject to subdivision 6, paragraph (b), copies of the completed notification and consent form must be provided to the resident and the resident's roommate, if applicable. Copies of all completed notification and consent forms must be submitted to the facility, and the facility must keep the notification and consent forms on file in a location separate from the resident's clinical record.

(c) The commissioner must prepare a notification and consent form required in this section no later than August 1, 2019, and must make the form available on the department's website.

Subd. 8. Costs and installation. (a) A resident or resident representative choosing to conduct electronic monitoring must do so at the resident's own expense, including paying for the purchase, installation, maintenance, and removal costs.

(b) If a resident chooses to install an electronic monitoring device that uses Internet technology for visual or audio monitoring and Internet service is not included in the rate or available through facility, the resident may be responsible for contracting with an Internet service provider.

(c) The facility must make a reasonable attempt to accommodate the resident's installation needs, including allowing access to the facility's telecommunications or equipment room. A facility has the burden of proving that a requested accommodation is not reasonable.

(d) All electronic monitoring device installations and supporting services must be Underwriters Laboratories-listed.

Subd. 9. Notice to visitors. A facility must post a sign at each entrance accessible to visitors that states: "Electronic monitoring devices may be present to record persons and activities" using bold typeface and using a font size that can be easily seen. The facility is responsible for installing and maintaining the signage required in this subdivision.

Subd. 10. Dissemination of data. (a) No person may access any video or audio recording created through electronic monitoring without the written consent of the resident or the resident representative.

(b) Except as required under other law, a recording or copy of a recording made as provided in this section may only be disseminated for the purpose of addressing health, safety, or welfare concerns of a resident or residents.

(c) Disseminating a recording or a copy of a recording that was made according to this section but in violation of this subdivision may be grounds for civil or criminal liability.

(d) An employee of a facility who is the subject of proposed corrective or disciplinary action based upon evidence obtained by electronic monitoring must be given access to that evidence for purposes of defending against the proposed action. The recording or a copy of the recording must be treated confidentially by the employee and must not be further disseminated to any other person except as required under law. Any copy of the recording must be returned to the facility or resident who provided the copy when it is no longer needed for purposes of defending against a proposed action.

Subd. 11. **Facility liability.** (a) A facility is not civilly or criminally liable for the inadvertent or unintentional disclosure of a recording by a resident or a resident representative for any purpose not authorized by this section.

(b) A facility is not civilly or criminally liable for a violation of a resident's right to privacy based solely on the use of electronic monitoring conducted as provided for in this section.

Subd. 12. **Obstruction of electronic monitoring.** (a) A person must not knowingly hamper, obstruct, tamper with, or destroy an electronic monitoring device placed in a resident's room or private living space without the permission of the resident or the resident's legal representative.

(b) It is not a violation of this subdivision if a person turns off the electronic monitoring device or blocks the visual recording component of the electronic monitoring device at the direction of the resident or the resident representative, or if consent for use of electronic monitoring has been withdrawn.

Subd. 13. **Resident rights and protection.** A facility must not:

(1) refuse to admit a potential resident or remove a resident because the facility disagrees with the potential resident's, the resident's, or the resident representative's decisions regarding electronic monitoring;

(2) retaliate against any resident for consenting or refusing to consent to electronic monitoring under this section; or

(3) prevent the placement or use of an electronic monitoring device by a resident who has provided the facility with notice and consent as required under this section.

Subd. 14. **Penalties.** The commissioner may issue a correction order upon a finding that the facility has failed to comply with this section. The commissioner may impose a fine of up to \$500 upon a finding of noncompliance with a correction order issued under this subdivision.

EFFECTIVE DATE. This section is effective August 1, 2019.

Sec. 8. **[144J.08] USE OF RESTRAINTS IN ASSISTED LIVING ESTABLISHMENTS.**

Residents of assisted living establishments must be free from any physical or chemical restraints imposed for purposes of discipline or convenience.

EFFECTIVE DATE. This section is effective August 1, 2019.

Sec. 9. **[144J.09] RETALIATION PROHIBITED IN ASSISTED LIVING ESTABLISHMENTS.**

(a) No assisted living establishment or agent of the assisted living establishment may retaliate against a resident or employee if the resident, employee, or any person on behalf of the resident:

(1) files a complaint or grievance, makes an inquiry, or asserts any right;

(2) indicates an intention to file a complaint or grievance, make an inquiry, or assert any right;

(3) files or indicates an intention to file a maltreatment report, whether mandatory or voluntary, under section 626.557;

(4) seeks assistance from or reports a reasonable suspicion of a crime or systemic problems or concerns to the administrator or manager of an assisted living establishment, the long-term care ombudsman, a regulatory or other government agency, or a legal or advocacy organization;

(5) advocates or seeks advocacy assistance for necessary or improved care or services or enforcement of rights under this section or other law;

(6) takes or indicates an intention to take civil action;

(7) participates or indicates an intention to participate in any investigation or administrative or judicial proceeding;

(8) contracts or indicates an intention to contract to receive services from a service provider of the resident's choice other than the assisted living establishment; or

(9) places or indicates an intention to place a camera or electronic monitoring device in the resident's private space as provided under section 144J.07.

(b) For purposes of this section, to "retaliate" against a resident includes but is not limited to any of the following actions taken or threatened by an assisted living establishment or an agent of the assisted living establishment against a resident, or any person with a familial, personal, legal, or professional relationship with the resident:

(1) discharge, eviction, transfer, or termination of services;

(2) the imposition of discipline, punishment, or a sanction or penalty;

(3) any form of discrimination;

(4) restriction or prohibition of access:

(i) of the resident to the facility or visitors; or

(ii) of a family member or a person with a personal, legal, or professional relationship with the resident, to the resident;

(5) imposition of involuntary seclusion or the withholding of food, care, or services;

(6) restriction of any of the rights granted to residents under state or federal law;

(7) restriction or reduction of access to or use of amenities, care, services, privileges, or living arrangements;

(8) arbitrary increase in charges or fees;

(9) removal, tampering with, or deprivation of technology, communication, or electronic monitoring devices; or

(10) any oral or written communication of false information about a person advocating on behalf of the resident.

(c) For purposes of this section, to "retaliate" against an employee includes but is not limited to any of the following actions taken or threatened by the assisted living establishment or an agent of the assisted living establishment against an employee:

(1) discharge or transfer;

(2) demotion or refusal to promote;

(3) reduction in compensation, benefits, or privileges;

(4) the unwarranted imposition of discipline, punishment, or a sanction or penalty; or

(5) any form of discrimination.

(d) There is a rebuttable presumption that any action, described in paragraph (b) or (c) and taken within 90 days of an initial action described in paragraph (a), is retaliatory.

EFFECTIVE DATE. This section is effective the day following final enactment.

Sec. 10. **[144J.10] DECEPTIVE MARKETING AND BUSINESS PRACTICES PROHIBITED.**

(a) For the purposes of this section, "provider" includes an assisted living establishment and an affiliated home care provider.

(b) Deceptive marketing and business practices by providers are prohibited. No employee or agent of any provider may:

(1) make any false, fraudulent, deceptive, or misleading statements or representations, or material omissions, in marketing, advertising, or any other description or representation of care or services;

(2) fail to inform a resident in writing of any limitations to care services available prior to executing an assisted living contract or home care service agreement; or

(3) advertise or represent that the assisted living establishment has a special care unit, such as for dementia or memory care, without:

(i) complying with disclosure requirements under sections 325F.72 and any training requirements required by law or rule; and

(ii) after July 1, 2020, meeting and complying with all the requirements under chapter 144I and any adopted rules.

EFFECTIVE DATE. This section is effective August 1, 2019.

Sec. 11. **[144J.11] NO DISCRIMINATION BASED ON SOURCE OF PAYMENT.**

Assisted living establishments and affiliated home care providers must, regardless of the source of payment and for all persons seeking to reside or residing in the assisted living establishment:

(1) provide equal access to quality care; and

(2) establish, maintain, and implement identical policies and practices regarding residency, transfer, and provision and termination of services.

EFFECTIVE DATE. This section is effective August 1, 2019.

Sec. 12. **[144J.12] ASSESSMENT OF RESIDENTS.**

(a) For each prospective resident, an assisted living establishment must conduct an initial assessment to determine the person's physical, cognitive, social, and service needs, and propose a plan for care and services based on the assessment, before the earlier of the date the prospective resident:

(1) enters into an assisted living contract under section 144J.02; or

(2) moves in.

(b) An assisted living establishment must conduct ongoing physical, cognitive, social, and service assessments to identify changes in the resident's conditions and indicate necessary changes in the resident's plan for care and services based on the assessment.

(c) The portion of the assessment that involves the prospective resident or resident's physical and cognitive condition must be conducted by a registered nurse, as required by applicable home care licensure requirements in chapter 144A and sections 148.171 to 148.285. The social and service components must be conducted by a qualified professional.

(d) The prospective resident has the right to participate in the care and service planning process and may include the prospective resident's designated representative, one or more family members, any health care and social service professionals of the resident's choosing, and the prospective resident's home care provider.

(e) The commissioner must adopt rules establishing assessment standards.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 13. **[144J.13] ASSISTED LIVING ESTABLISHMENTS; INVOLUNTARY DISCHARGES AND SERVICE TERMINATIONS.**

Subdivision 1. **Definition.** "Termination of housing or services" means an involuntary discharge, eviction, transfer, or service termination.

Subd. 2. **Prerequisite to termination of housing or services.** Before terminating a resident's housing or services, an assisted living establishment must explain in detail the reasons for the termination and work with the resident, the resident's designated representative, the resident's family, applicable agencies, and any relevant health-related or social service professionals to identify and offer reasonable accommodations, interventions, or alternatives to avoid the termination.

Subd. 3. **Permissible reasons to terminate housing or services.** (a) An assisted living establishment is prohibited from terminating housing or services for grounds other than those specified in paragraphs (b) and (c).

(b) A resident's housing or services may not be terminated except upon a written determination, supported by documentation, by the assisted living establishment administrator that termination is necessary because:

(1) it is mandated by law or court order;

(2) the resident has engaged in a documented pattern of conduct that:

(i) endangers the resident's own health, safety, or well-being;

(ii) endangers the health or safety of other residents or staff of the assisted living establishment or affiliated home care provider; or

(iii) repeatedly and substantially interferes with the rights, health, safety, or well-being of other residents; or

(3) the resident has committed any of the acts enumerated under section 504B.171, subdivision 1.

(c) A resident's housing or services may be terminated if the needs of the resident exceed the scope of the services for which the resident contracted for or, after July 1, 2020, exceed the scope of the assisted living establishment's license, only:

(1) upon a certification by the assisted living establishment administrator, based on an evaluation by a disinterested, licensed health care professional; and

(2) if the resident's needs cannot be safely met by reasonable accommodations, interventions, or alternatives.

(d) An assisted living establishment may initiate discharge, eviction, transfer, or termination of home care services procedures for nonpayment, provided the assisted living establishment:

(1) makes reasonable efforts to accommodate temporary financial hardship and provide information on government or private subsidies that may be available;

(2) timely responds to county social service agency questions regarding Medicaid or other public benefit eligibility and payment process; and

(3) provides the notice required under subdivision 4 to the ombudsman for long-term care.

A temporary interruption in benefits does not constitute nonpayment.

(e) When an affiliated home care provider voluntarily discontinues services to all residents, the affiliated home care provider must notify the commissioner, lead agencies, and ombudsman for long-term care about the residents and comply with the requirements of subdivisions 4 and 5.

Subd. 4. **Advance notice required.** An assisted living establishment must provide at least 30 days' advance notice to the resident and the ombudsman for long-term care of a termination of housing or services, except as provided in subdivision 6.

Subd. 5. **Content of notice.** The notice required under subdivision 4 must contain, at a minimum:

(1) the effective date of termination of housing or services;

(2) a detailed explanation of the basis for the termination, including but not limited to clinical or other supporting rationale;

(3) a list of known assisted living establishments and unaffiliated home care providers in the immediate geographic area;

(4) a statement that the resident has the right to appeal the termination, an explanation of how and to whom to appeal, and contact information for the Office of Administrative Hearings;

(5) information on how to contact the ombudsman for long-term care;

(6) if the resident must relocate, a statement that the assisted living establishment must actively participate in a coordinated transfer of care of the resident to another provider or caregiver, as required under subdivision 8.

(7) the name and contact information of a person employed by the assisted living establishment with whom the resident may discuss the notice of termination of housing or services; and

(8) if the termination is for services, a statement, if applicable, that the notice of termination of services does not constitute a termination of housing or an eviction from the resident's home, and that the resident has the right to remain in the assisted living establishment if the resident can secure necessary home care services from an unaffiliated home care provider.

Subd. 6. **Exception for emergencies.** (a) An assisted living establishment may relocate a resident from an assisted living establishment with less than 30 days' notice if:

(1) emergency relocation is ordered by the resident's physician; or

(2) the assisted living establishment administrator, based on documented evidence, determines that the resident needs to be immediately relocated because the resident or another resident or staff member of the assisted living establishment is at imminent risk of:

(i) death;

(ii) life-threatening harm;

(iii) substantial harm, as that term is defined in section 609.02, subdivision 7a; or

(iv) great bodily harm, as that term is defined in section 609.02, subdivision 8.

(b) An assisted living establishment relocating a resident under this subdivision must:

(1) ensure that the resident is moved to a safe and appropriate location;

(2) immediately notify the ombudsman for long-term care and the resident's designated representative or, if no designated representative and if known, a family member or interested person:

(i) that the resident has been relocated;

(ii) the reason for the relocation; and

(iii) the name, address, telephone number, and any other relevant contact information of the location to which the resident has been transferred; and

(3) upon removal of the conditions precipitating the emergency transfer, work and coordinate with the resident or the resident's designated representative and family, if applicable, to enable the resident to return to the assisted living establishment or, if return is not feasible or if any of the conditions under subdivision 3 exist, provide the resident with all the rights available under this section.

Subd. 7. **Right to appeal termination of housing or services.** (a) A resident or resident's designated representative has the right to appeal a termination of housing or services and request a hearing from the Office of Administrative Hearings. An appeal must be filed, in writing, to the Office of Administrative Hearings.

(b) The Office of Administrative Hearings must conduct an expedited hearing as soon as practicable after the office receives the request. The hearing must be held at the assisted living establishment where the resident lives, unless it is impractical, or the parties agree to a different place.

(c) The assisted living establishment bears the burden of proof to establish the termination of housing or services is permissible.

(d) During the pendency of an appeal and until a final determination is made by the Office of Administrative Hearings:

(1) housing or services may not be terminated; and

(2) the resident must be readmitted if the resident was hospitalized for medical necessity.

(e) The commissioner of health may order the assisted living establishment to rescind the termination of housing and services if the termination was in violation of state or federal law.

(f) Nothing in this section limits the right of a resident or the resident's designated representative to request or receive assistance from the ombudsman for long-term care and the protection and advocacy agency concerning the termination of housing or services.

Subd. 8. Discharge planning. (a) Unless the resident or the designated representative indicates a desire to assume full control of arranging the resident's relocation, the assisted living establishment from which a resident must relocate under this section:

(1) has an affirmative duty to ensure a coordinated and orderly transfer of the resident to a safe location that is appropriate for the resident; and

(2) must consult and cooperate with the resident, the resident's designated representative, family members, any interested professionals, and applicable agencies to make arrangements to relocate the resident.

(b) The assisted living establishment must prepare a written relocation plan. The plan must:

(1) contain all necessary steps to be taken to reduce transfer trauma; and

(2) specify the measures to be taken until relocation to protect the resident and meet the resident's health and safety needs.

(c) An assisted living establishment may not relocate the resident unless the place to which the resident is to be relocated indicates it will accept the resident.

(d) An assisted living establishment must timely convey the resident's records and any medication for which it is responsible to the location to which the resident will be transferred.

(e) An assisted living establishment must notify the ombudsman for long-term care, the Department of Health, and, if the resident is a vulnerable adult as defined in section 626.5572, subdivision 21, adult protective services, if:

(1) the resident whose housing or services are being terminated does not have a designated representative, family member, an agency responsible for the resident's placement, or any other person who agrees to assist with or assumes responsibility for the relocation; or

(2) a safe and appropriate relocation place for the resident whose housing or services are being terminated cannot be found.

EFFECTIVE DATE. This section is effective August 1, 2019.

Sec. 14. **[144J.14] FORCED ARBITRATION.**

(a) An assisted living establishment must affirmatively disclose to the resident any forced arbitration provision in an assisted living contract that precludes, limits, or delays the ability of a resident from taking a civil action. For contracts entered into on or after July 1, 2020, forced arbitration provisions must be conspicuously disclosed in a contract.

(b) A forced arbitration requirement must not include a choice of law or choice of venue provision. Assisted living contracts must adhere to Minnesota law and any other applicable federal or local law. Any civil actions by any litigant must be taken in Minnesota courts.

(c) A forced arbitration provision must not be unconscionable. All or the portion of a forced arbitration provision found by a court to be unconscionable shall have no effect on the remaining provisions, terms, or conditions of the contract.

EFFECTIVE DATE. This section is effective August 1, 2019, for contracts entered into on or after that date.

Sec. 15. **[144J.15] PRIVATE ENFORCEMENT OF RIGHTS.**

(a) For a violation of section 144J.06, subdivisions 9, 16, 19, or 20, or 144J.09, a resident or resident's designated representative may bring a civil action against an assisted living establishment and recover actual damages or \$3,000, whichever is greater, plus costs, including costs of investigation, and reasonable attorney fees, and receive other equitable relief as determined by the court in addition to seeking any other remedy otherwise available under law.

(b) For a violation of section 144J.10, 144J.11, or 144J.14, a resident is entitled to a permanent injunction, and any other legal or equitable relief as determined by the court, including but not limited to reformation of the contract and restitution for harm suffered, plus reasonable attorney fees and costs.

EFFECTIVE DATE. This section is effective August 1, 2019.

Sec. 16. **[144J.16] APPLICABILITY OF OTHER LAWS.**

(a) Assisted living establishments are subject to and must comply with chapter 504B.

(b) Housing with services establishments who operate under title protection under chapter 144G and, after July 1, 2020, all licensed assisted living establishments must comply with section 325F.72.

(c) Assisted living establishments are not required to obtain a lodging license under chapter 157 and related rules.

EFFECTIVE DATE. This section is effective August 1, 2019.

Sec. 17. Minnesota Statutes 2018, section 325F.72, subdivision 4, is amended to read:

Subd. 4. **Remedy.** The attorney general may seek the remedies set forth in section 8.31 for repeated and intentional violations of this section. ~~However, no private right of action may be maintained as provided under section 8.31, subdivision 3a.~~

Sec. 18. **REPEALER.**

(a) Minnesota Statutes 2018, sections 144A.44; 144A.441; 144A.442; 144D.07; 144G.03, subdivision 6; and 144G.04, are repealed effective August 1, 2019.

(b) Minnesota Statutes 2018, sections 144D.04, subdivisions 2 and 3; and 144D.045, are repealed effective January 1, 2020.

ARTICLE 2 NURSING HOMES

Section 1. Minnesota Statutes 2018, section 144.651, subdivision 1, is amended to read:

Subdivision 1. **Legislative intent.** It is the intent of the legislature and the purpose of this section to promote the interests and well being of the patients and residents of health care facilities. No health care facility may require a patient or resident to waive these rights as a condition of admission to the facility. Any designated representative, guardian, or conservator of a patient or resident ~~or, in the absence of a guardian or conservator, an interested person,~~ may seek enforcement of these rights on behalf of a patient or resident. ~~An interested person~~ A designated representative may also seek enforcement of these rights on behalf of a patient or resident who has a guardian or conservator through administrative agencies or in district court ~~having jurisdiction over guardianships and conservatorships, under section 144.6512.~~ Pending the outcome of an enforcement proceeding the health care facility may, in good faith, comply with the instructions of a guardian or conservator. It is the intent of this section that every patient's civil and religious liberties, including the right to independent personal decisions and knowledge of available choices, shall not be infringed and that the facility shall encourage and assist in the fullest possible exercise of these rights.

EFFECTIVE DATE. This section is effective August 1, 2019.

Sec. 2. Minnesota Statutes 2018, section 144.651, is amended by adding a subdivision to read:

Subd. 34. Retaliation prohibited. (a) A facility may not retaliate against a patient, resident, or employee if the resident or any person with a familial, personal, legal, or professional relationship with the patient or resident:

(1) files a complaint or grievance, makes an inquiry, or asserts any right;

(2) indicates an intention to file a complaint or grievance, makes an inquiry, or asserts any right;

(3) files or indicates an intention to file a maltreatment report, whether mandatory or voluntary, under section 626.557;

(4) seeks assistance from or reports a reasonable suspicion of a crime or systemic problems or concerns to the administrator or manager of a facility, the ombudsman for long-term care, a regulatory or other government agency, or a legal or advocacy organization;

(5) advocates or seeks advocacy assistance for necessary or improved care or services or enforcement of rights under this section or other law;

(6) takes or indicates an intention to take civil action; or

(7) participates or indicates an intention to participate in any investigation or administrative or judicial proceeding.

(b) For purposes of this subdivision, "facility" includes an agent of the facility.

(c) For the purposes of this subdivision, to "retaliate" against a patient or resident includes but is not limited to any of the following actions taken or threatened by the facility against a patient or resident, or any person with a familial, personal, legal, or professional relationship with the patient or resident:

(1) discharge, transfer, or termination of services;

(2) the imposition of discipline, punishment, or a sanction or penalty;

(3) any form of discrimination;

(4) restricting or prohibiting access:

(i) of the patient or resident to the facility or visitors; or

(ii) of a family member or a person with a personal, legal, or professional relationship with the patient or resident, to the patient or resident;

(5) imposition of involuntary seclusion or withholding food, care, or services;

(6) restriction of any of the rights granted to patients and residents under state or federal law;

(7) restriction or reduction of access to or use of amenities, care, services, privileges, or living arrangements;

(8) arbitrary increase in charges or fees; or

(9) removal, tampering with, or deprivation of technology, communication, or electronic monitoring devices.

(d) For purposes of this subdivision, to "retaliate" against an employee includes but is not limited to any of the following actions taken or threatened by the facility:

(1) discharge or transfer;

(2) demotion or refusal to promote;

(3) reduction in compensation, benefits, or privileges;

(4) the imposition of discipline, punishment, or a sanction or penalty; or

(5) any form of discrimination.

(e) There is a rebuttable presumption that any action described in paragraph (b) or (c) and taken within 90 days of an initial action described in paragraph (a) is retaliatory.

EFFECTIVE DATE. This section is effective August 1, 2019.

Sec. 3. **[144.6512] ENFORCEMENT OF THE HEALTH CARE BILL OF RIGHTS BY NURSING HOME RESIDENTS.**

In addition to the remedies otherwise provided by or available under law, a resident of a nursing home, or a legal representative on behalf of a resident, in addition to seeking any remedy otherwise available under law, may bring a civil action against a nursing home and recover actual damages or \$3,000, whichever is greater, plus costs, including costs of investigation, and reasonable attorney fees, and receive other equitable relief as determined by the court for violation of section 144.651, subdivisions 14, 20, 26, 30, and 34.

EFFECTIVE DATE. This section is effective August 1, 2019.

ARTICLE 3
HOUSING WITH SERVICES ESTABLISHMENTS

Section 1. Minnesota Statutes 2018, section 144D.01, subdivision 2a, is amended to read:

Subd. 2a. **Arranged Affiliated home care provider.** "Arranged Affiliated home care provider" means a home care provider licensed under chapter 144A or a home management provider registered under section 144A.482 that provides supportive services to some or all of the residents of a housing with services establishment and that is either the establishment itself or another entity with which the establishment has an arrangement under a business relationship or other affiliation with the establishment.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 2. Minnesota Statutes 2018, section 144D.01, is amended by adding a subdivision to read:

Subd. 2b. **Client.** "Client" means a person to whom an unaffiliated home care provider provides supportive services.

Sec. 3. Minnesota Statutes 2018, section 144D.01, subdivision 4, is amended to read:

Subd. 4. **Housing with services establishment or establishment.** (a) "Housing with services establishment" or "establishment" means:

~~(1) an establishment providing sleeping accommodations to one or more adult residents, at least 80 percent of which are 55 years of age or older, and offering or providing, for a fee, one or more regularly scheduled health-related services or two or more regularly scheduled supportive services, whether offered or provided directly or by the establishment or by another entity arranged for by the establishment; or an affiliated home care provider.~~

~~(2) an establishment that registers under section 144D.025.~~

(b) Housing with services establishment does not include:

(1) a nursing home licensed under chapter 144A;

(2) a hospital, ~~certified~~ as defined in section 144.50, subdivision 2;

(3) a boarding care home, ~~or as defined in Minnesota Rules, part 4655.0010, subpart 3;~~

(4) a supervised living facility ~~licensed under sections 144.50 to 144.56, as defined in Minnesota Rules, part 4665.0100, subpart 10;~~

(~~3~~) (5) a board and lodging establishment licensed under chapter 157 ~~and or 245G, or governed under Minnesota Rules, parts 9520.0500 to 9520.0670, or under chapter 245D or 245G;~~

(6) an assisted living establishment, as defined in section 144I.01, subdivision 6, that is not a housing with services establishment;

(4) ~~a board and lodging~~ (7) any establishment which that serves as a shelter for battered women or other similar purpose;

(5) ~~a family~~ (8) adult foster care home licensed by the Department of Human Services;

(6) (9) private homes in which the residents are related by kinship, law, or affinity with the providers of services;

(7) (10) residential settings for persons with developmental disabilities in which the services are licensed under chapter 245D;

(8) (11) a home-sharing arrangement such as when an elderly or disabled, including but not limited to arrangements where an older person or person with a disability or single-parent family makes lodging in a private residence available to another person in exchange for services or rent, or both;

(9) (12) a duly organized condominium, cooperative, common interest community, or owners' association of the foregoing organized under chapter 515B where at least 80 percent of the units that comprise the condominium, cooperative, or common interest community are occupied by individuals who are the owners, members, or shareholders of the units;

(10) (13) services for persons with developmental disabilities that are provided under a license under chapter 245D; or

(11) (14) a temporary family health care dwelling as defined in sections 394.307 and 462.3593.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 4. Minnesota Statutes 2018, section 144D.01, is amended by adding a subdivision to read:

Subd. 4a. **Resident.** "Resident" means a person living in a housing with services establishment.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 5. Minnesota Statutes 2018, section 144D.01, subdivision 5, is amended to read:

Subd. 5. **Supportive services.** "Supportive services" means help with personal laundry, handling or assisting with personal funds of residents, or arranging for medical services, health related services, social services,;

(1) assistance with laundry, shopping, and household chores;

(2) housekeeping services;

(3) provision or assistance with meals or food preparation;

(4) help with arranging for, or arranging transportation to, medical, social, recreational, personal, or social services appointments; or

(5) provision of social or recreational services.

Arranging for services does not include making referrals, ~~assisting a resident in contacting a service provider of the resident's choice,~~ or contacting a service provider in an emergency.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 6. Minnesota Statutes 2018, section 144D.01, is amended by adding a subdivision to read:

Subd. 8. Unaffiliated home care provider. "Unaffiliated home care provider" means a home care provider licensed under chapter 144A or a home management provider registered under section 144A.482 that is regularly engaged for a fee in the delivery of one or more home care services directly to a client in any setting, including supportive services to a resident of a housing with services establishment, provided the home care provider has no business relationship or affiliation with the housing with services establishment in which the client contracting for or receiving supportive services resides.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 7. Minnesota Statutes 2018, section 144D.015, is amended to read:

144D.015 DEFINITION FOR PURPOSES OF LONG-TERM CARE INSURANCE.

For purposes of consistency with terminology commonly used in long-term care insurance policies ~~and notwithstanding chapter 144G,~~ a housing with services establishment that is registered under section 144D.03 and that holds, or makes arrangements with an individual or entity that holds any type of home care license and all other licenses, permits, registrations, or other governmental approvals legally required for delivery of the services the establishment offers or provides to its residents, constitutes an "assisted living establishment," an "assisted living facility," or "assisted living residence."

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 8. Minnesota Statutes 2018, section 144D.02, is amended to read:

144D.02 REGISTRATION REQUIRED.

No entity may establish, operate, conduct, or maintain a housing with services establishment in this state without registering and operating as required in sections 144D.01 to ~~144D.06~~ 144D.11. After July 1, 2020, a housing with services establishment, either directly or through an affiliated home care provider, may provide only supportive services. No housing with services establishment may offer or provide services that require an assisted living license under chapter 144I.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 9. Minnesota Statutes 2018, section 144D.04, subdivision 1, is amended to read:

Subdivision 1. **Contract required.** No housing with services establishment may operate in this state unless a written housing with services contract, ~~as defined in subdivision 2,~~ satisfying the requirements of section 144J.02 is executed between the establishment and each resident or resident's representative and unless the establishment operates in accordance with the terms of the contract. ~~The resident or the resident's representative shall be given a complete copy of the contract and all supporting documents and attachments and any changes whenever changes are made.~~

EFFECTIVE DATE. This section is effective January 1, 2020.

Sec. 10. Minnesota Statutes 2018, section 144D.05, is amended to read:

144D.05 AUTHORITY OF COMMISSIONER.

~~The commissioner shall, upon receipt of information which may indicate the failure of the housing with services establishment, a resident, a resident's representative, or a service provider to comply with a legal requirement to which one or more of them may be subject, make appropriate referrals to other governmental agencies and entities having jurisdiction over the subject matter. The commissioner may also make referrals to any public or private agency the commissioner considers available for appropriate assistance to those involved.~~

~~The commissioner shall have standing to bring an action for injunctive relief in the district court in the district in which an establishment is located to compel the housing with services establishment to meet the requirements of this chapter or other requirements of the state or of any county or local governmental unit to which the establishment is otherwise subject. Proceedings for securing an injunction may be brought by the commissioner through the attorney general or through the appropriate county attorney. The sanctions in this section do not restrict the availability of other sanctions all the authority and power vested under chapters 144 and 144I.~~

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 11. Minnesota Statutes 2018, section 144D.06, is amended to read:

144D.06 OTHER LAWS.

In addition to registration under this chapter, a housing with services establishment must comply with chapter 504B ~~and the provisions of section 325F.72,~~ and shall obtain and maintain all other licenses, permits, registrations, or other governmental approvals required of it. A housing with services establishment is not required to obtain a lodging license under chapter 157 and related rules.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 12. Minnesota Statutes 2018, section 144D.09, is amended to read:

144D.09 TERMINATION OF ~~LEASE~~ HOUSING OR SUPPORTIVE SERVICES.

~~Subdivision 1. **Prerequisite to termination of housing or supportive services.** The housing with services establishment shall include with notice of termination of lease information about how to contact the ombudsman for long term care, including the address and telephone number along with a statement of how to request problem solving assistance. Before involuntarily terminating a resident's housing or supportive services, whether provided directly or through an affiliated home care provider, a housing with services establishment must explain in detail the reasons for the termination and work with the resident, the resident's representative, the resident's family, applicable agencies, and any professionals to identify and offer reasonable accommodations, interventions, or alternatives to avoid termination of housing or supportive services.~~

Subd. 2. **Advance notice required.** A housing with services establishment must provide at least 30 days' advance notice to the resident of a termination of housing or supportive services, except as provided in subdivision 4.

Subd. 3. **Content of notice.** The notice required under subdivision 2 must contain, at a minimum:

(1) the effective date of termination;

(2) the reason or reasons for termination;

(3) a list of known housing with services establishments and unaffiliated home care providers in the immediate geographic area;

(4) the name and contact information of a person employed by the housing with services establishment with whom the resident may discuss the notice of termination;

(5) information about how to contact the ombudsman for long-term care, including the address and telephone number along with a statement of how to request problem-solving assistance; and

(6) if the termination is for supportive services, a statement, if applicable, that the notice of termination of supportive services does not constitute a termination of housing or an eviction from the resident's housing, and that the resident has the right to remain in the housing with services establishment if the resident can secure necessary supportive services from an unaffiliated home care provider.

Subd. 4. **Exception for emergencies.** (a) A housing with services establishment may provide less than 30 days' notice when:

(1) an emergency relocation is ordered by the resident's physician or an advanced practice registered nurse; or

(2) the resident needs to be immediately relocated because, due to the resident's behavior, the resident or another resident or staff member of the housing with services establishment is at imminent risk of:

(i) death;

(ii) life-threatening harm;

(iii) substantial bodily harm, as defined in section 609.02, subdivision 7a; or

(iv) great bodily harm, as defined in section 609.02, subdivision 8.

(b) A housing with services establishment relocating a resident under this subdivision must:

(1) ensure that the resident is relocated to a safe and appropriate location; and

(2) immediately notify the person or persons representing the resident, or who are in a familial or other personal relationship with the resident:

(i) that the resident has been relocated;

(ii) the reason for the relocation; and

(iii) the name, address, telephone number, and any other relevant contact information of the location to which the resident has been transferred.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 13. Minnesota Statutes 2018, section 144D.10, is amended to read:

144D.10 MANAGER REQUIREMENTS.

(a) The person primarily responsible for oversight and management of a housing with services establishment, as designated by the owner of the housing with services establishment, must obtain at least 30 hours of continuing education every two years of employment as the manager in topics relevant to the operations of the housing with services establishment and the needs of its tenants. Continuing education earned to maintain a professional license, such as nursing home administrator license, nursing license, social worker license, and real estate license, can be used to complete this requirement.

~~(b) For managers of establishments identified in section 325F.72, this continuing education must include at least eight hours of documented training on the topics identified in section 144D.065, paragraph (b), within 160 working hours of hire, and two hours of training on these topics for each 12 months of employment thereafter.~~

~~(c) For managers of establishments not covered by section 325F.72, but who provide assisted living services under chapter 144G, this continuing education must include at least four hours of documented training on the topics identified in section 144D.065, paragraph (b), within 160 working hours of hire, and two hours of training on these topics for each 12 months of employment thereafter.~~

~~(d)~~ (b) A statement verifying compliance with the continuing education requirement must be included in the housing with services establishment's annual registration to the commissioner of health. The establishment must maintain records for at least three years demonstrating that the person primarily responsible for oversight and management of the establishment has attended educational programs as required by this section.

~~(e)~~ (c) New managers ~~may~~ must ~~satisfy the initial and document satisfaction of~~ dementia training requirements ~~by producing written proof of previously completed required training within the past 18 months adopted by the commissioner in rule.~~

~~(f) This section does not apply to an establishment registered under section 144D.025 serving the homeless.~~

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 14. Minnesota Statutes 2018, section 144D.11, is amended to read:

144D.11 EMERGENCY PLANNING.

(a) Each registered housing with services establishment must meet the following requirements:

(1) have a written emergency disaster plan that contains a plan for evacuation, addresses elements of sheltering in-place, identifies temporary relocation sites, and details staff assignments in the event of a disaster or an emergency;

(2) post an emergency disaster plan prominently;

(3) provide building emergency exit diagrams to all ~~tenants~~ residents upon signing a ~~lease~~ contract under section 144J.02;

(4) post emergency exit diagrams on each floor; and

(5) have a written policy and procedure regarding missing ~~tenants~~ residents.

(b) Each registered housing with services establishment must provide emergency and disaster training to all staff during the initial staff orientation and annually thereafter and must make emergency and disaster training available to all ~~tenants~~ residents annually. Staff who have not received emergency and disaster training are allowed to work only when trained staff are also working on site.

(c) Each registered housing with services location must conduct and document a fire drill or other emergency drill at least every six months. To the extent possible, drills must be coordinated with local fire departments or other community emergency resources.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 15. **REPEALER.**

Minnesota Statutes 2018, section 144D.09, is repealed effective August 1, 2019.

ARTICLE 4 ASSISTED LIVING LICENSURE

Section 1. Minnesota Statutes 2018, section 144.057, subdivision 1, is amended to read:

Subdivision 1. **Background studies required.** The commissioner of health shall contract with the commissioner of human services to conduct background studies of:

(1) individuals providing services ~~which that~~ have direct contact, as defined under section 245C.02, subdivision 11, with patients and residents in hospitals, boarding care homes, outpatient surgical centers licensed under sections 144.50 to 144.58; nursing homes and home care agencies licensed under chapter 144A; residential care homes licensed under chapter 144B, assisted living establishments licensed under chapter 144J, and board and lodging establishments that are registered to provide supportive or health supervision services under section 157.17;

(2) individuals specified in section 245C.03, subdivision 1, who perform direct contact services in a nursing home or a home care agency licensed under chapter 144A or a boarding care home licensed under sections 144.50 to 144.58. If the individual under study resides outside Minnesota, the study must include a check for substantiated findings of maltreatment of adults and children in the individual's state of residence when the information is made available by that state, and must include a check of the National Crime Information Center database;

(3) beginning July 1, 1999, all other employees in assisted living establishments licensed under chapter 144J, nursing homes licensed under chapter 144A, and boarding care homes licensed under sections 144.50 to 144.58. A disqualification of an individual in this section shall disqualify the individual from positions allowing direct contact or access to patients or residents receiving services. "Access" means physical access to a client or the client's personal property without continuous, direct supervision as defined in section 245C.02, subdivision 8, when the employee's employment responsibilities do not include providing direct contact services;

(4) individuals employed by a supplemental nursing services agency, as defined under section 144A.70, who are providing services in health care facilities; and

(5) controlling persons of a supplemental nursing services agency, as defined under section 144A.70.

If a facility or program is licensed by the Department of Human Services and subject to the background study provisions of chapter 245C and is also licensed by the Department of Health, the Department of Human Services is solely responsible for the background studies of individuals in the jointly licensed programs.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 2. Minnesota Statutes 2018, section 144.0721, is amended to read:

144.0721 ASSESSMENTS OF CARE AND SERVICES TO NURSING HOME AND ASSISTED LIVING RESIDENTS.

Subdivision 1. **Appropriateness and quality.** Until the date of implementation of the revised case mix system based on the minimum data set, the commissioner of health shall assess the appropriateness and quality of care and services furnished to private paying residents in assisted living establishments, nursing homes, and boarding care homes that are certified for participation in the medical assistance program under United States Code, title 42, sections 1396-1396p. These assessments shall be conducted until the date of implementation of the revised case mix system with the exception of provisions requiring recommendations for changes in the level of care provided to the private paying residents.

Subd. 2. **Access to data.** With the exception of summary data, data on individuals that is collected, maintained, used, or disseminated by the commissioner of health under subdivision 1 is private data on individuals and shall not be disclosed to others except:

- (1) under section 13.05;
- (2) under a valid court order;
- (3) to the assisted living establishment, nursing home, or boarding care home in which the individual resided at the time the assessment was completed;
- (4) to the commissioner of human services; or
- (5) to county home care staff for the purpose of assisting the individual to be discharged from a nursing home or boarding care home and returned to the community.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 3. Minnesota Statutes 2018, section 144.122, is amended to read:

144.122 LICENSE, PERMIT, AND SURVEY FEES.

(a) The state commissioner of health, by rule, may prescribe procedures and fees for filing with the commissioner as prescribed by statute and for the issuance of original and renewal permits, licenses, registrations, and certifications issued under authority of the commissioner. The expiration dates of the various licenses, permits, registrations, and certifications as prescribed by the rules shall be plainly marked thereon. Fees may include application and examination fees and a penalty fee for renewal applications submitted after the expiration date of the previously issued permit, license, registration, and certification. The commissioner may also prescribe, by rule, reduced fees for permits, licenses, registrations, and certifications when the application therefor is submitted during the last three months of the permit, license, registration, or certification period. Fees proposed to be prescribed in the rules shall be first approved by the Department of Management and Budget. All fees proposed to be prescribed in rules shall be reasonable. The fees shall be in an amount so that the total fees collected by the commissioner will, where practical, approximate the cost to the commissioner in administering the program. All fees collected shall be deposited in the state treasury and credited to the state government special revenue fund unless otherwise specifically appropriated by law for specific purposes.

(b) The commissioner may charge a fee for voluntary certification of medical laboratories and environmental laboratories, and for environmental and medical laboratory services provided by the department, without complying with paragraph (a) or chapter 14. Fees charged for environment and medical laboratory services provided by the department must be approximately equal to the costs of providing the services.

(c) The commissioner may develop a schedule of fees for diagnostic evaluations conducted at clinics held by the services for children with disabilities program. All receipts generated by the program are annually appropriated to the commissioner for use in the maternal and child health program.

(d) The commissioner shall set license fees for hospitals, assisted living establishments, and nursing homes that are not boarding care homes at the following levels:

| | |
|--|---|
| Joint Commission on Accreditation of Healthcare Organizations (JCAHO) and American Osteopathic Association (AOA) hospitals | \$7,655 plus \$16 per bed |
| Non-JCAHO and non-AOA hospitals | \$5,280 plus \$250 per bed |
| Nursing home | \$183 plus \$91 per bed until June 30, 2018. \$183 plus \$100 per bed between July 1, 2018, and June 30, 2020. \$183 plus \$105 per bed beginning July 1, 2020. |
| <u>Level 1 assisted living establishment</u> | <u>\$.....</u> |
| <u>Level 2 assisted living establishment</u> | <u>\$.....</u> |
| <u>Level 3 assisted living establishment</u> | <u>\$.....</u> |

The commissioner shall set license fees for outpatient surgical centers, boarding care homes, and supervised living facilities at the following levels:

| | |
|------------------------------|--------------------------|
| Outpatient surgical centers | \$3,712 |
| Boarding care homes | \$183 plus \$91 per bed |
| Supervised living facilities | \$183 plus \$91 per bed. |

Fees collected under this paragraph are nonrefundable. The fees are nonrefundable even if received before July 1, 2017, for licenses or registrations being issued effective July 1, 2017, or later.

(e) Unless prohibited by federal law, the commissioner of health shall charge applicants the following fees to cover the cost of any initial certification surveys required to determine a provider's eligibility to participate in the Medicare or Medicaid program:

| | |
|--|--|
| Prospective payment surveys for hospitals | \$900 |
| Swing bed surveys for nursing homes | \$1,200 |
| Psychiatric hospitals | \$1,400 |
| Rural health facilities | \$1,100 |
| Portable x-ray providers | \$500 |
| Home health agencies | \$1,800 |
| Outpatient therapy agencies | \$800 |
| End stage renal dialysis providers | \$2,100 |
| Independent therapists | \$800 |
| Comprehensive rehabilitation outpatient facilities | \$1,200 |
| Hospice providers | \$1,700 |
| Ambulatory surgical providers | \$1,800 |
| Hospitals | \$4,200 |
| Other provider categories or additional resurveys required to complete initial certification | Actual surveyor costs: average surveyor cost x number of hours for the survey process. |

These fees shall be submitted at the time of the application for federal certification and shall not be refunded. All fees collected after the date that the imposition of fees is not prohibited by federal law shall be deposited in the state treasury and credited to the state government special revenue fund.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 4. Minnesota Statutes 2018, section 144A.18, is amended to read:

144A.18 ADMINISTRATOR'S LICENSES; PENALTY.

No person shall act as a nursing home administrator or assisted living establishment administrator or purport to be a nursing home administrator or assisted living establishment administrator unless that person is licensed by the Board of Examiners for Nursing Home and Assisted Living Establishment Administrators. A violation of this section is a misdemeanor.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 5. Minnesota Statutes 2018, section 144A.19, subdivision 1, is amended to read:

Subdivision 1. **Creation; membership.** There is hereby created the Board of Examiners for Nursing Home and Assisted Living Establishment Administrators ~~which that~~ shall consist of the following members:

(1) a designee of the commissioner of health who shall be a nonvoting member;

(2) a designee of the commissioner of human services who shall be a nonvoting member; and

(3) the following members appointed by the governor:

(i) two members actively engaged in the management, operation, or ownership of proprietary nursing homes and two members actively engaged in the management, operation, or ownership of assisted living establishments;

(ii) two members actively engaged in the management or operation of nonprofit nursing homes and two members actively engaged in the management or operation of nonprofit assisted living establishments;

(iii) one member actively engaged in the practice of medicine;

(iv) one member actively engaged in the practice of professional nursing; and

(v) three public members as defined in section 214.02.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 6. Minnesota Statutes 2018, section 144A.20, subdivision 1, is amended to read:

Subdivision 1. **Criteria.** The Board of Examiners may issue licenses to qualified persons as nursing home or assisted living establishment administrators, and shall establish qualification criteria for nursing home and assisted living establishment administrators. No license shall be issued to a person as a nursing home or assisted living establishment administrator unless that person:

(1) is at least 21 years of age and otherwise suitably qualified;

(2) has satisfactorily met standards set by the Board of Examiners, which standards shall be designed to assure that nursing home and assisted living establishment administrators will be individuals who, by training or experience are qualified to serve as nursing home or assisted living establishment administrators; and

(3) has passed an examination approved by the board and designed to test for competence in the subject matters referred to in clause (2), or has been approved by the Board of Examiners through the development and application of other appropriate techniques.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 7. Minnesota Statutes 2018, section 144A.21, is amended to read:

144A.21 ADMINISTRATOR LICENSES.

Subdivision 1. **Transferability.** A nursing home or assisted living establishment administrator's license shall not be transferable.

Subd. 2. **Rules; renewal.** The Board of Examiners by rule shall establish forms and procedures for the processing of license renewals. A nursing home or assisted living establishment administrator's license may be renewed only in accordance with the standards adopted by the Board of Examiners pursuant to section 144A.24.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 8. Minnesota Statutes 2018, section 144A.23, is amended to read:

144A.23 JURISDICTION OF BOARD.

Except as provided in section 144A.04, subdivision 5, the board of examiners shall have exclusive authority to determine the qualifications, skill and fitness required of any person to serve as an administrator of a nursing home or assisted living establishment. The holder of a license shall be deemed fully qualified to serve as the administrator of a nursing home or assisted living establishment.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 9. Minnesota Statutes 2018, section 144A.24, is amended to read:

144A.24 DUTIES OF THE BOARD.

The Board of Examiners shall:

(1) develop and enforce standards for nursing home and assisted living establishment administrator licensing, which standards shall be designed to assure that nursing home administrators will be individuals of good character who, by training or experience, are suitably qualified to serve as nursing home or assisted living establishment administrators;

(2) develop appropriate techniques, including examinations and investigations, for determining whether applicants and licensees meet the board's standards;

(3) issue licenses and permits to those individuals who are found to meet the board's standards;

(4) establish and implement procedures designed to assure that individuals licensed as nursing home and assisted living establishment administrators will comply with the board's standards;

(5) receive and investigate complaints and take appropriate action consistent with chapter 214, to revoke or suspend the license or permit of a nursing home or assisted living establishment administrator or acting administrator who fails to comply with sections 144A.18 to 144A.27 or the board's standards;

(6) conduct a continuing study and investigation of nursing homes, and the administrators of nursing homes and assisted living establishments within the state, with a view to the improvement of the standards imposed for the licensing of administrators and improvement of the procedures and methods used for enforcement of the board's standards; and

(7) approve or conduct courses of instruction or training designed to prepare individuals for licensing in accordance with the board's standards. Courses designed to meet license renewal requirements shall be designed solely to improve professional skills and shall not include classroom attendance requirements exceeding 50 hours per year. The board may approve courses conducted within or without this state.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 10. Minnesota Statutes 2018, section 144A.251, is amended to read:

144A.251 MANDATORY PROCEEDINGS.

In addition to its discretionary authority to initiate proceedings under section 144A.24 and chapter 214, the Board of Examiners shall initiate proceedings to suspend or revoke a nursing home or assisted living establishment administrator license or shall refuse to renew a license if within the preceding two-year period the administrator was employed at a nursing home ~~which~~ or assisted living establishment that during the period of employment incurred the following number of uncorrected violations, which violations were in the jurisdiction and control of the administrator and for which a fine was assessed and allowed to be recovered:

(1) two or more uncorrected violations which created an imminent risk of harm to a nursing home resident; or

(2) ten or more uncorrected violations of any nature.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 11. Minnesota Statutes 2018, section 144A.2511, is amended to read:

144A.2511 COSTS; PENALTIES.

If the Board of Examiners has initiated proceedings under section 144A.24 or 144A.251 or chapter 214, and upon completion of the proceedings has found that a nursing home or assisted living establishment administrator has violated a provision or provisions of sections 144A.18 to 144A.27, it may impose a civil penalty not exceeding \$10,000 for each separate violation, with all violations related to a single event or incident considered as one violation. The amount of the civil penalty shall be fixed so as to deprive the nursing home or assisted living establishment administrator of any economic advantage gained by reason of the violation charged or to reimburse the board for the cost of the investigation and proceeding. For purposes of this section, the cost of the investigation and proceeding may include, but is not limited to, fees paid for services provided by the Office of Administrative Hearings, legal and investigative services provided by the Office of the Attorney General, court reporters, witnesses, and reproduction of records.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 12. Minnesota Statutes 2018, section 144A.26, is amended to read:

144A.26 RECIPROCITY WITH OTHER STATES.

The board of examiners may issue a nursing home or assisted living establishment administrator's license, without examination, to any person who holds a current license as a nursing home or assisted living establishment administrator from another jurisdiction if the board finds that the standards for licensure in the other jurisdiction are at least the substantial equivalent of those prevailing in this state and that the applicant is otherwise qualified.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 13. Minnesota Statutes 2018, section 144A.27, is amended to read:

144A.27 ACTING ADMINISTRATORS.

If a licensed nursing home or assisted living establishment administrator is removed from the position by death or other unexpected cause, the controlling persons of the nursing home suffering the removal may designate an acting nursing home or assisted living establishment administrator who shall secure an acting administrator's permit within 30 days of appointment as the acting administrator.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 14. **[144L.01] DEFINITIONS.**

Subdivision 1. Administrator. "Administrator" means a person who administers, manages, supervises, or is in general administrative charge of an assisted living establishment, whether or not the individual has an ownership interest in the assisted living establishment, and whether or not the person's functions and duties are shared with one or more individuals, and who is licensed under chapter 144A.

Subd. 2. Adult. "Adult" means a person who is at least 18 years of age.

Subd. 3. Affiliated home care provider. "Affiliated home care provider" means a home care provider licensed under chapter 144A that provides home care services to residents of an assisted living establishment under a business relationship or other affiliation with an assisted living establishment.

Subd. 4. Applicant. "Applicant" means the assisted living establishment.

Subd. 5. Assisted living establishment. (a) "Assisted living establishment" means an entity that, for a fee, provides sleeping accommodations to one or more adults and offers or provides, directly or through an affiliated home care provider, home care services to any resident in the establishment.

(b) Assisted living establishment does not include:

(1) shelters, transitional housing, or any other residential units serving exclusively or primarily homeless individuals, as defined in section 116L.361;

(2) a housing with services establishment registered under chapter 144D;

(3) a hospital, as defined in section 144.50, subdivision 2;

(4) a boarding care home, as defined in Minnesota Rules, part 4655.0100, subpart 3;

(5) a supervised living facility, as defined in Minnesota Rules, part 4665.0100, subpart 10;

(6) a board and lodging establishment licensed under chapter 157 or 245G, or governed under Minnesota Rules, parts 9520.0500 to 9520.0670;

(7) any establishment that serves as a shelter for battered women or other similar purpose;

(8) adult foster care licensed by the Department of Human Services;

(9) private homes in which the residents are related by kinship, law, or affinity to the providers of services;

(10) residential settings for persons with developmental disabilities in which the services are licensed under chapter 245D;

(11) a home-sharing arrangement, including but not limited to arrangements where an older person, person with a disability, or single-parent family makes lodging in a private residence available to another person in exchange for services or rent, or both;

(12) a condominium, cooperative, common interest community, or owners' association organized under chapter 515B where at least 80 percent of the units that comprise the condominium, cooperative, common interest community, or association are occupied by individuals who are the owners, members, or shareholders of the units; and

(13) services for persons with developmental disabilities that are provided under chapter 245D; or

(14) a temporary family health care dwelling as defined in sections 394.307 and 462.3593.

Subd. 6. Basic home care services. "Basic home care services" means:

(1) the services described in section 144A.471, subdivision 6; and

(2) any of the following services:

(i) daily or periodic monitoring or supervision of the resident's functioning and needs to ensure the resident's well-being;

(ii) provision of meals;

(iii) help with arranging for medical, social, recreational, personal, or social service appointments, or arranging transportation for medical, social, recreational, personal, or social service appointments; or

(iv) provision of social or recreational services.

Subd. 7. Commissioner. "Commissioner" means the commissioner of health.

Subd. 8. Comprehensive home care services. "Comprehensive home care services" means the services described in section 144A.471, subdivision 7.

Subd. 9. Controlling person. (a) "Controlling person" means any business entity, officer, assisted living establishment administrator, or director whose responsibilities include the direction of the management or policies of an assisted living establishment. Controlling person also means any person who, directly or indirectly, beneficially owns any interest in:

(1) any corporation, partnership, or other business association that is a controlling person of an assisted living establishment;

(2) the land on which an assisted living establishment is located;

(3) the structure in which an assisted living establishment is located;

(4) any mortgage, contract for deed, or other obligation secured in whole or part by the land or structure comprising an assisted living establishment; or

(5) any lease or sublease of the land, structure, or facilities comprising an assisted living establishment.

(b) Controlling person does not include:

(1) a bank, savings bank, trust company, savings association, credit union, industrial loan and thrift company, investment banking firm, or insurance company, unless the entity directly or through a subsidiary operates an assisted living establishment;

(2) a public or government entity;

(3) an individual state official or state employee, or a member or employee of the governing body of a political subdivision of the state that operates one or more assisted living establishments, unless the individual is also an officer or director of an assisted living establishment, receives any remuneration from an assisted living establishment, or owns any of the beneficial interests not excluded in this subdivision;

(4) a natural person who is a member of a tax-exempt organization under section 290.05, subdivision 2, unless the individual is also an officer or director of an assisted living establishment or owns any of the beneficial interests not excluded in this subdivision; and

(5) a natural person who owns less than five percent of the outstanding common shares of a corporation:

(i) whose securities are exempt as provided in section 80A.45, clause (6); or

(ii) whose transactions are exempt as provided in section 80A.46, clause (7).

Subd. 10. Designated representative. "Designated representative" means:

(1) a court-appointed guardian;

(2) a conservator;

(3) an attorney-in-fact;

(4) a health care agent, as defined in section 145C.01, subdivision 2; or

(5) a person chosen by the resident and identified in the resident's records on file with the assisted living establishment.

Subd. 11. Home care service agreement or service agreement. "Home care service agreement" or "service agreement" means the written agreement described in section 144A.43, subdivision 27, between a private client or a private client's representative and an unaffiliated home care provider delineating the home care services that will be provided to the private client for a fee.

Subd. 12. **Home care services.** "Home care services" means either basic or comprehensive home care services.

Subd. 13. **Ombudsman.** "Ombudsman" means the ombudsman for long-term care.

Subd. 14. **Plan for care and services.** "Plan for care and services" means the individualized written record documenting the results of the individualized care and service planning process based on the assessments described in section 144I.13, subdivision 3.

Subd. 15. **Resident.** "Resident" means a person living in an assisted living establishment.

Subd. 16. **Unaffiliated home care provider.** "Unaffiliated home care provider" means an individual, organization, association, corporation, or other entity that, for a fee:

(1) has a valid current temporary license or license issued under chapter 144A, or is exempt from licensure;

(2) is regularly engaged in the delivery of one or more home care services directly to a resident in any residential setting; and

(3) has no business relationship or affiliation with the assisted living establishment where the resident receiving services lives.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 15. **[144I.02] LICENSURE; PENALTY.**

Subdivision 1. **Licensing levels.** There shall be three levels of licensure of assisted living establishments. Level 1 licensure is required for all assisted living establishments that offer basic home care services. Level 2 licensure is required for all assisted living establishments that offer comprehensive home care services. Level 3 licensure is required for all Level 1 or Level 2 licensed assisted living establishments that offer, provide, advertise, or hold themselves out by whatever name or descriptor as offering or providing special care for persons with cognitive impairments, including Alzheimer's disease or other forms of dementia.

Subd. 2. **License required.** (a) No entity may open, operate, maintain, or advertise itself as an assisted living establishment unless the entity is licensed as a Level 1 or Level 2 assisted living establishment under this chapter. The commissioner may license an entity as an assisted living establishment if the entity meets the criteria established under this chapter, and any adopted rules.

(b) No entity may open, operate, maintain, or advertise itself as an assisted living establishment that offers, by any name, memory care, dementia care, or special care for persons with cognitive impairments, including Alzheimer's disease or other forms of dementia, unless the entity is licensed as a Level 3 assisted living establishment under this chapter and any adopted rules.

Subd. 3. **Contents of license.** A license must:

(1) include the address of the entity to be licensed and the legal property description;

(2) specify the location and square footage of the floor space constituting the entity;

(3) incorporate by reference the plans and specifications of the entity, which must be kept on file with the commissioner;

(4) specify the level or levels of care and services that the entity is licensed to provide; and

(5) state any conditions or limitations imposed on the entity according to the rules of the commissioner.

Subd. 4. **Home care provider license required.** (a) No assisted living establishment or affiliated home care provider may offer or provide home care services to a resident unless the establishment or provider has a valid home care provider license under chapter 144A.

(b) Assisted living establishments providing home care services directly and affiliated home care providers must comply with sections 144A.471 to 144A.483.

Subd. 5. **Violations; penalty.** (a) Operating an assisted living establishment without a license is a misdemeanor punishable by a fine imposed by the commissioner by adopted rule.

(b) A person or entity that, before obtaining a license, advertises an assisted living establishment that is required to be licensed under this chapter is guilty of a misdemeanor.

(c) A controlling person of an assisted living establishment in violation of this section is guilty of a misdemeanor. The provisions of this subdivision shall not apply to any controlling person who had no legal authority to affect or change decisions related to the operation of the assisted living establishment.

(d) The sanctions in this section do not restrict other available sanctions.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 16. **[144I.03] LICENSE APPLICATION.**

Subdivision 1. **Form; requirements.** (a) The commissioner shall establish forms and procedures for processing assisted living establishment license applications.

(b) An application for an assisted living establishment license must include the following information for the assisted living establishment:

(1) the business name, street address, mailing address if different from the street address, and legal property description of the establishment;

(2) the legal name or designation of the establishment and any affiliated home care provider;

(3) the name, mailing address, which may not be a post office box, e-mail address, and telephone number of:

(i) all owners, controlling persons, and managerial employees of the assisted living establishment;

(ii) any affiliated home care provider;

(iii) all officers and members of the governing body, or comparable person for partnerships, limited liability corporations, or other legal designation for the business organizational structure of the assisted living establishment;

(iv) the managing agent of the establishment, if different from the owner or owners; and

(v) the on-site manager of the establishment;

(4) disclosure of:

(i) whether any owner, controlling party, managing agent, on-site manager, or controlling person of the assisted living establishment or any affiliated home care provider has ever been convicted of a crime or found civilly liable for an offense involving moral turpitude, including forgery, embezzlement, obtaining money under false pretenses, larceny, extortion, conspiracy to defraud, or any other similar offense or violation, or any violation of section 626.557 or any other similar law in any other state, or any violation of a federal or state law or regulation in connection with activities involving any consumer fraud, false advertising, deceptive trade practices, or similar consumer protection law;

(ii) any judgments, private or public litigation, tax liens, written complaints, administrative actions, or investigations by any government agency against the applicant or the applicant's affiliated home care provider, or officer, director or manager of, or shareholder owning more than five percent interest in the applicant or the applicant's affiliated home care provider that are unresolved or otherwise filed or commenced within the preceding ten years;

(iii) whether the applicant or the applicant's affiliated home care provider, or any person employed by the applicant or the applicant's affiliated home care provider, has a record of defaulting in the payment of money collected for others, including the discharge of debts through bankruptcy proceedings; and

(iv) whether the applicant or the applicant's home care provider's license or registration in this or any other state to provide the services for which the applicant seeks to be licensed has ever been revoked or suspended;

(5) a copy of the architectural and engineering plans and specifications of the facility as prepared and certified by an architect or engineer registered to practice in this state;

(6) a showing of proof that the establishment is in compliance with the workers' compensation insurance coverage requirement, as provided under section 176.82;

(7) a showing of proof that the establishment has sufficient liability coverage;

(8) for applicants for a Level 3 license:

(i) verification that the establishment will comply with the requirements of section 325F.72; and

(ii) evidence satisfactory to the commissioner that the assisted living establishment has met the requirements in rules adopted by the commissioner for qualifications and training of administrators and staff of Level 3 licensed establishments;

(9) if applicable, evidence satisfactory to the commissioner that the affiliated home care provider has a current license, as required under section 144A.471, subdivision 1, and meets all applicable requirements under statute and rule to provide home care services to residents; and

(10) any other relevant information the commissioner determines is necessary to properly evaluate an application for license.

(c) An application for any assisted living license must be signed by the owner or owners, or an authorized agent of the owner or owners. An application submitted on behalf of a corporation, association, or governmental unit or instrumentality must be signed by at least two officers or managing agents of that entity.

(d) If the owner of the assisted living establishment is a corporation, an authorized agent of the corporation must submit copies of articles of incorporation and bylaws and any amendments as they occur, together with the names and addresses of the assisted living establishment's officers and directors. If the assisted living establishment is owned by a foreign corporation, an authorized agent must furnish the commissioner with a copy of the foreign corporation's certificate of authority to do business in this state.

Subd. 2. **Agents.** (a) An application for any assisted living establishment license or for renewal of an assisted living establishment license must specify one or more controlling persons or managerial employees as agents:

(1) who shall be responsible for dealing with the commissioner on all requirements of this chapter and chapter 144J; and

(2) on whom personal service of all notices and orders shall be made, and who shall be authorized to accept service on behalf of all of the controlling persons of the assisted living establishment, in proceedings under this chapter.

(b) Notwithstanding any law to the contrary, personal service on the designated person or persons named in the application is deemed to be service on all of the controlling persons or managerial employees of the assisted living establishment, and it is not a defense to any action arising under this chapter, that personal service was not made on each controlling person or managerial employee of the assisted living establishment. The designation of one or more controlling persons or managerial employees under this subdivision shall not affect the legal responsibility of any other controlling person or managerial employee under this chapter or chapter 144J.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 17. **[144I.04] LICENSE RENEWALS.**

Unless the assisted living establishment license expires or is suspended or revoked under section 144I.05, a license shall remain effective for a period of one year from the date of issuance. The commissioner must establish forms and procedures for the processing of license renewals. The commissioner must approve a license renewal application if the assisted living establishment continues to satisfy the requirements, standards, and conditions of this chapter and adopted rules.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 18. **[144I.05] LICENSE SUSPENSION OR REVOCATION; HEARING; RELICENSING.**

Subdivision 1. **Optional proceedings.** The commissioner may institute proceedings to suspend or revoke any assisted living establishment's license or may refuse to grant or renew an assisted living establishment's license if any action by a controlling person or employee of the assisted living establishment:

(1) violates any of the provisions of this chapter, or adopted rules;

(2) permits, aids, or abets the commission of any illegal act;

(3) performs any act contrary to the welfare of a resident of the assisted living establishment; or

(4) obtains, or attempts to obtain, a license by fraudulent means or misrepresentation.

Subd. 2. **Mandatory proceedings.** (a) The commissioner must initiate proceedings within 60 days of notification to suspend or revoke an assisted living establishment's license or must refuse to renew an assisted living establishment's license if within the preceding two years the assisted living establishment has incurred the following number of uncorrected or repeated violations:

(1) two or more uncorrected violations or one or more repeated violations that created an imminent risk to direct resident care or safety; or

(2) four or more uncorrected violations or two or more repeated violations of any nature for which the fines are in the four highest daily fine categories prescribed in rule.

(b) Notwithstanding paragraph (a), the commissioner is not required to revoke, suspend, or refuse to renew an assisted living establishment's license if the establishment corrects the violation.

Subd. 3. **Notice to residents.** (a) Within five working days after proceedings are initiated by the commissioner to revoke or suspend an assisted living establishment's license, or a decision by the commissioner not to renew an assisted living establishment's license, the controlling person of the assisted living establishment or a designee must provide to the commissioner and the ombudsman for long-term care the names of residents and the names and addresses of the residents' guardians, designated representatives, and family contacts.

(b) The controlling person or designees of the assisted living establishment must provide updated information each month until the proceeding is concluded. If the controlling person or designee of the assisted living establishment fails to provide the information within this time, the assisted living establishment is subject to the issuance of:

(1) a correction order; and

(2) a penalty assessment by the commissioner in rule.

(c) Notwithstanding section 144I.08, any correction order issued under this subdivision must require that the assisted living establishment immediately comply with the request for information and that, as of the date of the issuance of the correction order, the establishment shall forfeit to the state a \$500 fine the first day of noncompliance and an increase in the \$500 fine by \$100 increments for each day the noncompliance continues.

(d) Information provided under this subdivision may be used by the commissioner or the ombudsman for long-term care only for the purpose of providing affected consumers information about the status of the proceedings.

(e) Within ten working days after the commissioner initiates proceedings to revoke, suspend, or not renew an assisted living establishment license, the commissioner must send a written notice of the action and the process involved to each resident of the assisted living establishment and the resident's designated representative or, if there is no designated representative and if known, a family member or interested person.

(f) The commissioner shall provide the ombudsman for long-term care with monthly information on the department's actions and the status of the proceedings.

Subd. 4. **Hearing.** An assisted living establishment license may not be suspended or revoked, and renewal may not be denied, without a hearing held as a contested case hearing under chapter 14. The hearing must commence within 60 days after the proceedings are initiated. If the controlling person of the assisted living establishment designated under section 144I.03, subdivision 2, as an agent to accept service on behalf of all of the controlling persons of the assisted living establishment has been notified by the commissioner that the establishment will not receive an initial license or that a license renewal has been denied, the controlling person or a legal representative on behalf of the assisted living establishment may request and receive a hearing on the denial. This hearing shall be held as a contested case under chapter 14.

Subd. 5. **Mandatory revocation.** Notwithstanding the provisions of subdivision 4, the commissioner must revoke an assisted living license if a controlling person of the assisted living establishment is convicted of a felony or gross misdemeanor that relates to operation of the assisted living establishment or directly affects resident safety or care. The commissioner shall notify the assisted living establishment and the Office of Ombudsman for Long-Term Care 30 days in advance of the date of revocation.

Subd. 6. **Relicensing.** If an assisted living establishment license is revoked, a new application for license may be considered by the commissioner when the conditions upon which the revocation was based have been corrected and satisfactory evidence of this fact has been furnished to the commissioner. A new license may be granted after an inspection has been made and the facility has been found to comply with all provisions of this chapter and chapter 144J and adopted rules.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 19. **[144I.06] REGULATORY POWERS.**

(a) With the exception of the Department of Public Safety, which has the exclusive jurisdiction to enforce state fire and safety standards, the commissioner is the exclusive state agency charged with the responsibility and duty of inspecting assisted living establishments required to be licensed under this chapter and for enforcing adopted rules. The commissioner has all the powers vested and all the duties assigned with respect to assisted living establishments as the commissioner has with respect to nursing homes under sections 144A.10, subdivisions 1 to 6, 6d, 6e, 7, 8, 9, 10, and 17; and 144A.11.

(b) The commissioner may request and must be given access to relevant information, records, incident reports, or other documents in the possession of a licensed assisted living establishment if the commissioner considers them necessary for the discharge of responsibilities. For the purposes of inspections and securing information to determine compliance with licensure laws and rules, the commissioner need not present a release, waiver, or consent of the individual. The identities of patients or residents must be kept private as defined in section 13.02, subdivision 12.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 20. **[144I.07] FEES AND FINES.**

(a) Each application for a license and each renewal application to operate an assisted living establishment must be accompanied by a fee to be prescribed by rule by the commissioner as provided in section 144.122. No fee shall be refunded. In any assisted living establishment where home care services are delivered through an affiliated home care provider, the fee will be applied to the assisted living establishment license only.

(b) The commissioner shall adopt rules to establish a schedule of fines for violations of this chapter and any applicable rules.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 21. **[144I.08] INJUNCTIVE RELIEF; SUBPOENAS.**

Subdivision 1. **Injunctive relief.** In addition to any other remedy provided by law, the commissioner may bring an action in district court to enjoin a person who is involved in the management, operation, or control of an assisted living establishment, or an employee of an assisted living establishment, from illegally engaging in activities regulated by this chapter and chapter 144J. A temporary restraining order may be granted by the court in the proceeding if continued activity by the controlling person or employee of the assisted living establishment would create an imminent risk of harm to a resident of the assisted living establishment.

Subd. 2. **Subpoenas.** In all matters pending before the commissioner under this chapter, the commissioner shall have the power to issue subpoenas and compel the attendance of witnesses and the production of all necessary papers, books, records, documents, and other evidentiary material. Any person failing or refusing to appear or testify regarding any matter about which that person may be lawfully questioned or to produce any papers, books, records, documents, or evidentiary materials in the matter to be heard, after having been required by order or subpoena of the commissioner to do so, may, upon application by the commissioner to the district court in any district, be ordered by the court to comply therewith. The commissioner may issue subpoenas and administer oaths to witnesses, or take their affirmation. Depositions may be taken within or without the state in the manner provided by law for the taking of depositions in civil actions. A subpoena or other process or paper may be served upon any named person anywhere within the state by any officer authorized to serve subpoenas in civil actions, with the same fees and mileage and in the same manner as prescribed by law for process issued by the district court of this state. Fees and mileage and other costs of persons subpoenaed by the commissioner shall be paid in the same manner as for proceedings in district court.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 22. **[144I.09] TRANSFER OF INTERESTS.**

Subdivision 1. **Notice; expiration of license.** Any controlling person who makes any transfer of a beneficial interest in any assisted living establishment must notify the commissioner of the transfer within 14 days of its occurrence. The notification must identify by name and address the transferor and transferee and must specify the nature and amount of the transferred interest. The commissioner upon determining that the transferred beneficial interest exceeds ten percent of the total beneficial interest in the assisted living establishment, the structure in which the facility is located, or the land upon which the structure is located may require that the license of the assisted living establishment expire 90 days after the day of transfer. The commissioner upon determining that the transferred beneficial interest exceeds 50 percent of the total beneficial interest in the establishment, the structure in which the facility is located, or the land upon which the structure is located must require that the license of the assisted living establishment expire 90 days after the date of transfer. The commissioner must notify the assisted living establishment by certified mail of the expiration of the license at least 60 days prior to the date of expiration.

Subd. 2. **Relicensure.** The commissioner shall prescribe procedures for relicensure under this section. The commissioner shall relicense the assisted living establishment if the establishment satisfies the requirements of this chapter and chapter 144J. An assisted living establishment must not be relicensed by the commissioner if at the time of transfer there are any uncorrected violations. The commissioner may temporarily waive correction of one or more violations if the commissioner determines that:

(1) temporary noncorrection of the violation will not create an imminent risk of harm to any assisted living establishment resident; and

(2) a controlling person of the assisted living establishment on behalf of all other controlling persons:

(i) has entered into a contract to obtain the materials or labor necessary to correct the violation, but the supplier or other contractor has failed to perform the terms of the contract and the inability of the assisted living establishment to correct the violation is due solely to that failure; or

(ii) is otherwise making a diligent good faith effort to correct the violation.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 23. **[144I.10] ASSISTED LIVING ESTABLISHMENT ADMINISTRATORS.**

Each assisted living establishment must employ an administrator who must be licensed or permitted as an assisted living establishment administrator by the Board of Examiners for Nursing Home and Assisted Living Establishment Administrators, as provided under section 144A.18. The assisted living establishment may share the services of a licensed administrator. The administrator must maintain a sufficient on-site presence in the assisted living establishment to effectively manage the establishment in compliance with applicable statutes, rules, and regulations. The administrator must establish procedures and delegate authority for on-site operations in the administrator's absence, but is ultimately responsible for the management of the assisted living establishment. Each assisted living establishment must have posted at all times the name of the administrator and the name of the person in charge on the premises in the absence of the licensed administrator.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 24. **[144I.11] ADMINISTRATOR OR MANAGERIAL EMPLOYEE RESTRICTIONS.**

Subdivision 1. **Restrictions.** An assisted living establishment may not employ as an administrator or managerial employee any person who was an administrator or managerial employee of a nursing home or another assisted living establishment during any period of time in the previous two-year period:

(1) during which time of employment that nursing home or other assisted living establishment incurred the following number of uncorrected violations:

(i) two or more uncorrected violations or one or more repeated violations that created an imminent risk to direct resident care or safety; or

(ii) four or more uncorrected violations or two or more repeated violations of any nature for which the fines are in the four highest daily fine categories prescribed in rule; or

(2) who, during that period, was convicted of a felony or gross misdemeanor that relates to the operation of the nursing home or assisted living establishment, or directly affects resident safety or care.

Subd. 2. **Exception.** The provisions of subdivision 1 do not apply to any violations incurred that were outside the jurisdiction and control of the managerial employee or the administrator.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 25. **[144I.12] CONTROLLING PERSON RESTRICTIONS.**

Subdivision 1. **Restrictions.** The controlling person of any assisted living establishment may not include any person who was a controlling person of a nursing home or another assisted living establishment during any period of time in the previous two-year period:

(1) during which time of control that nursing home or other assisted living establishment incurred the following number of uncorrected or repeated violations:

(i) two or more uncorrected violations or one or more repeated violations that created an imminent risk to direct resident care or safety; or

(ii) four or more uncorrected violations or two or more repeated violations of any nature for which the fines are in the four highest daily fine categories prescribed in rule; or

(2) who, during that period, was convicted of a felony or gross misdemeanor that relates to the operation of the nursing home or other assisted living establishment, or directly affects resident safety or care.

Subd. 2. **Exception.** The provisions of subdivision 1 do not apply to any controlling person of the assisted living establishment who had no legal authority to affect or change decisions related to the operation of the nursing home or other assisted living establishment that incurred the uncorrected violations.

Subd. 3. **Stay of adverse action required by controlling person restrictions.** (a) In lieu of revoking, suspending, or refusing to renew the license of an assisted living establishment where a controlling person was disqualified by subdivision 1, clause (1), the commissioner may issue an order staying the revocation, suspension, or nonrenewal of the assisted living establishment's license. The order may but need not be contingent upon the assisted living establishment's compliance with restrictions and conditions imposed on the license to ensure the proper operation of the assisted living establishment and to protect the health, safety, comfort, treatment, and well-being of the residents in the establishment. The decision to issue an order for a stay must be made within 90 days of the commissioner's determination that a controlling person of the assisted living establishment is disqualified by subdivision 1, clause (1), from operating an assisted living establishment.

(b) In determining whether to issue a stay and to impose conditions and restrictions, the commissioner must consider the following factors:

(1) the ability of the controlling person to operate other assisted living establishments in accordance with the licensure rules and laws;

(2) the conditions in the nursing home or assisted living establishment that received the number and type of uncorrected or repeated violations described in subdivision 1, clause (1); and

(3) the conditions and compliance history of each of the nursing homes and assisted living establishments operated by the controlling persons.

(c) The commissioner's decision to exercise the authority under this subdivision in lieu of revoking, suspending, or refusing to renew the license of the assisted living establishment is not subject to administrative or judicial review.

(d) The order for the stay of revocation, suspension, or nonrenewal of the assisted living establishment license must include any conditions and restrictions on the license that the commissioner deems necessary based upon the factors listed in paragraph (b).

(e) Prior to issuing an order for stay of revocation, suspension, or nonrenewal, the commissioner shall inform the controlling person in writing of any conditions and restrictions that will be imposed. The controlling person shall, within ten working days, notify the commissioner in writing of a decision to accept or reject the conditions and restrictions. If the assisted living establishment rejects any of the conditions and restrictions, the commissioner must either modify the conditions and restrictions or take action to suspend, revoke, or not renew the assisted living establishment's license.

(f) Upon issuance of the order for a stay of revocation, suspension, or nonrenewal, the controlling person shall be responsible for compliance with the conditions and restrictions contained therein. Any time after the conditions and restrictions have been in place for 180 days, the controlling person may petition the commissioner for removal or modification of the conditions and restrictions. The commissioner must respond to the petition within 30 days of the receipt of the written petition. If the commissioner denies the petition, the controlling person may request a hearing under the provisions of chapter 14. Any hearing shall be limited to a determination of whether the conditions and restrictions shall be modified or removed. At the hearing, the controlling person has the burden of proof.

(g) The failure of the controlling person to comply with the conditions and restrictions contained in the order for stay shall result in the immediate removal of the stay and the commissioner shall take action to suspend, revoke, or not renew the license.

(h) The conditions and restrictions are effective for two years after the date they are imposed.

(i) Nothing in this subdivision shall be construed to limit in any way the commissioner's ability to impose other sanctions against an assisted living establishment licensee under the standards in state or federal law whether or not a stay of revocation, suspension, or nonrenewal is issued.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 26. **[144I.13] MINIMUM SERVICES AND STANDARDS.**

Subdivision 1. **Generally.** (a) An assisted living establishment must meet the standards and requirements of this section and offer a package of housing, care, and services that meet the needs of the residents and for which the resident contracted.

(b) Provided they are within the scope of the license and consistent with this section, assisted living establishments may:

(1) offer to residents and prospective residents services other than those required as a minimum;

(2) offer any package of services to residents, provided the package includes those services required as a minimum; and

(3) offer or provide services directly or through a licensed affiliated home care provider.

(c) Assisted living establishments may offer and provide assisted living services to all or some of the residents.

Subd. 2. **Housing and safety.** (a) An assisted living establishment must maintain minimum health, sanitation, safety, and comfort standards prescribed by the commissioner in adopted rules with respect to the physical plant, equipment, maintenance, and operation of the assisted living establishment, including standards with respect to evacuation of ambulatory and nonambulatory residents and controlled egress and secured perimeters for residents in Level 3 licensed assisted living establishments.

(b) The commissioner may temporarily waive compliance with one or more of the standards or requirements if the commissioner determines that:

(1) temporary noncompliance with the standard or requirement will not create an imminent risk of harm to a resident; and

(2) a controlling person of an assisted living establishment on behalf of all other controlling persons of the establishment:

(i) has entered into a contract to obtain the materials or labor necessary to meet the standard or requirement established by the commissioner, but the supplier or other contractor has failed to perform the terms of the contract and the inability of the assisted living establishment to meet the standard or requirement is due solely to that failure; or

(ii) is otherwise making a diligent good faith effort to meet the standard or requirement.

Subd. 3. **Assessments.** (a) The commissioner must establish by rule assessment standards and protocols to determine the person's physical, cognitive, social, and service needs. The rules must provide that the physical and cognitive components of the assessments must be conducted by a registered nurse, as required by applicable home care licensure requirements in chapter 144A and sections 148.171 to 148.285, and the social and service components must be conducted by a qualified professional, with the active participation of the resident.

(b) The assessment prior to move-in must be:

(1) designed to ensure that the licensee can meet the needs and expectations of the resident;

(2) used to develop the plan for care and services; and

(3) conducted before the earlier of the date the prospective resident enters into an assisted living contract under section 144J.02 or moves in.

(c) The standards for assessments prior to move-in and ongoing assessments must cover:

(1) the qualifications and training required for persons conducting the social and service components of the assessments;

(2) the elements of the physical and cognitive evaluation of the resident;

(3) evaluation of activities of daily living, as defined in section 256B.0659, subdivision 1, paragraph (b);

(4) evaluation of instrumental activities of daily living, as defined in section 256B.0659, subdivision 1, paragraph (i);

(5) evaluation of the resident's medicine administration and management abilities;

(6) any other standards deemed necessary by the commissioner.

(d) The commissioner must develop for use by all licensees a uniform assessment tool to be completed for all residents prior to the resident's move-in date and at subsequent intervals as determined by rule and is based on the standards under paragraph (c).

Subd. 4. **Minimum services.** (a) A Level 1 licensee may offer all or a package of basic home care services that at a minimum must include two meals per day, weekly housekeeping, and weekly laundry service. A Level 1 licensee may offer therapeutic or other dementia care services as determined by the commissioner in rule, but may not offer, provide, advertise, or hold themselves as offering or providing dementia care services that would require a Level 3 license. A Level 1 licensee may not offer or provide any comprehensive home care services.

(b) A Level 2 licensee may offer all or a package of comprehensive home care services that at a minimum must include two meals per day, weekly housekeeping, and weekly laundry service. A Level 2 licensee may offer therapeutic or other dementia care services as determined by the commissioner in rule, but may not offer, provide, advertise, or hold themselves as offering or providing dementia care services that would require a Level 3 license.

(c) A Level 3 licensee must meet the requirements of a Level 2 licensee and may in addition offer, provide, advertise, or hold themselves as offering or providing dementia care services. The dementia care services offered or provided must meet the standards established by the commissioner, by rule, as provided under subdivision 5, and must be provided by staff who meet the standards established by the commissioner in rule to provide dementia care services in Level 3 establishments.

Subd. 5. Staffing and training standards. (a) Every assisted living establishment must:

(1) provide staff access to an on-call registered nurse 24 hours per day, seven days per week;

(2) have and maintain a system for delegation of health care activities to unlicensed personnel by a registered nurse, including supervision and evaluation of the delegated activities as required by applicable home care licensure requirements in chapter 144A and sections 148.171 to 148.285; and

(3) have a person or persons available 24 hours per day, seven days per week, who is responsible for responding to the requests of residents for assistance with health or safety needs, who must be:

(i) awake;

(ii) located in the same building, in an attached building, or on a contiguous campus with the assisted living establishment in order to respond within a reasonable amount of time;

(iii) capable of communicating with residents;

(iv) capable of recognizing the need for assistance;

(v) capable of providing either the assistance required or summoning the appropriate assistance; and

(vi) capable of following directions.

(b) The commissioner must establish, by rule, the minimum initial and ongoing training requirements for staff and administrators of Level 1, Level 2, and Level 3 assisted living establishments licensed under this chapter, including training on sections 144J.06 to 144J.10 and minimum Alzheimer's disease, dementia, memory, and any other special care training requirements.

(c) The commissioner must adopt rules that, at a minimum:

(1) require all assisted living establishments to maintain sufficient staffing at all times to meet the scheduled and reasonably foreseeable unscheduled needs of each resident as required by the residents' contracts, assessments, and plans for care and services;

(2) establish minimum educational, professional, skills, competency, and experiential requirements for administrators and staff of assisted living establishments; and

(3) include any additional requirements for licensing or certification of staff who are health care professionals and who are providing dementia care services in Level 3 assisted living establishments.

Subd. 6. Medications. The commissioner must establish, by rule, standards for Level 1, Level 2, and Level 3 assisted living establishments to provide:

(1) medication administration, as defined in section 144A.43, subdivision 11;

(2) medication management, as defined in section 144A.43, subdivision 12; and

(3) medication storage.

Subd. 7. **Dementia care standards.** The commissioner must establish, by rule, service and training standards for the care of persons with cognitive impairments, including Alzheimer's disease and dementia, that are specific for staff and administrators at each level of licensure. The standards must include, at a minimum:

- (1) core criteria;
- (2) minimum safety and quality requirements;
- (3) assessments;
- (4) care planning;
- (5) therapeutic activities;
- (6) cultural competencies; and
- (7) dementia care training curriculum.

Sec. 27. **[144I.14] TRANSFER OF RESIDENTS WITHIN ESTABLISHMENT.**

(a) An assisted living establishment must provide for the safe, orderly, and appropriate transfer of residents within the establishment.

(b) If an assisted living contract permits resident transfers within the assisted living establishment, the establishment must provide at least 30 days' advance notice of the transfer to the resident and the resident's designated representative.

(c) In situations where there is a curtailment, reduction, capital improvement, or change in operations within an assisted living establishment, the establishment must minimize the number of transfers needed to complete the project or change in operations, consider individual resident needs and preferences, and provide reasonable accommodation for individual resident requests regarding the room transfer. The assisted living establishment must provide notice to the Office of Ombudsman for Long-Term Care and, when appropriate, the Office of Ombudsman for Mental Health and Developmental Disabilities, in advance of any notice to residents, residents' designated representatives, and families, when all of the following circumstances apply:

(1) the transfers of residents within the assisted living establishment are being proposed due to curtailment, reduction, capital improvements, or change in operations;

(2) the transfers of residents within the assisted living establishment are not temporary moves to accommodate physical plan upgrades or renovation; and

(3) the transfers involve multiple residents being moved simultaneously.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 28. **[144I.15] REIMBURSEMENT UNDER ASSISTED LIVING SERVICE PACKAGES.**

The requirements for the elderly waiver program's assisted living payment rates under section 256B.0915, subdivision 3e, shall continue to be effective and providers who do not meet the requirements of this chapter may continue to receive payment under section 256B.0915, subdivision 3e, as long as the provider continues to meet the definitions and standards for assisted living and assisted living plus in the federally approved Elderly Home and

Community-Based Services Waiver Program. Providers of assisted living for the community access for disability inclusion (CADI) and Brain Injury (BI) waivers shall continue to receive payment as long as the provider continues to meet the definitions and standards for assisted living and assisted living plus in the federally approved CADI and BI waiver plans.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 29. **[144I.17] STATE RECEIVERSHIP.**

Subdivision 1. **Petition; notice.** (a) In addition to any other remedy provided by law, the commissioner may petition the district court for an order directing the controlling person of an assisted living establishment to show cause why the commissioner should not be appointed receiver to operate the establishment. The petition to the district court shall contain proof by affidavit that one or more of the following exists:

(1) the commissioner has commenced proceedings to suspend or revoke the state license, or refuses to renew a license;

(2) violations of this chapter or chapter 144J, adopted rules, or violations of other state laws or rules create an emergency for the residents of the establishment;

(3) a threat of imminent abandonment by the owner or operator of the assisted living establishment; or

(4) a pattern of failure to meet ongoing financial obligations such as failing to pay for food, pharmaceuticals, personnel, or required insurance.

(b) The order to show cause shall be personally served to either the assisted living establishment or to the person designated as the agent by the controlling person to accept service on their behalf pursuant to section 144I.03, subdivision 2.

Subd. 2. **Appointment of receiver, rental.** (a) If, after the hearing, the court finds that receivership is necessary as a means of protecting the health, safety, or welfare of a resident of the assisted living establishment, the court shall appoint the commissioner as a receiver to take charge of the establishment. The commissioner may enter into an agreement for a managing agent to work on the commissioner's behalf in operating the assisted living establishment during the receivership. The court shall determine a fair monthly rental for the assisted living establishment, taking into account all relevant factors including the condition of the establishment. This rental fee shall be paid by the receiver to the appropriate controlling person for each month that the receivership remains in effect but shall be reduced by the amount that the cost of the receivership provided under section 256R.52 are in excess of the establishment rate.

(b) The controlling person may agree to waive the fair monthly rent by affidavit to the court. Notwithstanding any other law to the contrary, no payment made to a controlling person of an assisted living establishment by any state agency during a period of receivership shall include any allowance for profit or be based on any formula that includes an allowance for profit.

(c) Notwithstanding state contracting requirements in chapter 16C, the commissioner shall establish and maintain a list of qualified licensed assisted living establishment administrators, or other qualified persons or organizations with experience in delivering skilled health care services, home care services, and the operation of long-term care facilities, for those interested in being a managing agent on the commissioner's behalf during a state receivership of an establishment. The list will be a resource for choosing a managing agent and the commissioner may update the list at any time. A managing agent cannot be someone who:

(1) is the owner, licensee, or administrator of the establishment;

(2) has a financial interest in the assisted living establishment at the time of the receivership or is a related party to the owner, licensee, or administrator; or

(3) has owned or operated any nursing home, assisted living establishment, or boarding care home that has been ordered into receivership.

Subd. 3. **Emergency procedure.** If it appears from the petition filed under subdivision 1, or from an affidavit or affidavits filed with the petition, or from testimony of witnesses under oath when the court determines that this is necessary, that there is probable cause to believe that an emergency exists in an assisted living establishment requiring the receivership, the court shall issue a temporary order for appointment of a receiver within two days after receipt of the petition. Notice of the petition shall be served personally on the assisted living establishment administrator or on the person designated as the agent by the controlling person to accept service on their behalf according to section 144I.03, subdivision 2. A hearing on the petition shall be held within five days after notice is served unless the administrator or designated agent consents to a later date. After the hearing, the court may continue, modify, or terminate the temporary order.

Subd. 4. **Powers and duties of receiver.** (a) An assisted living establishment receiver appointed according to this section shall with all reasonable speed and within 18 months after the receivership order, determine whether to close the assisted living establishment or to make other provisions intended to keep it open. If closure is the determination, the commissioner shall provide for the orderly transfer of all of the assisted living establishment's residents to other locations according to the relocation procedures required in section 144A.161. During the receivership, the receiver may correct or eliminate those deficiencies in the assisted living establishment that seriously endanger the life, health, or safety of the residents unless the correction or elimination of deficiencies involves major alterations in the physical structure of the assisted living establishment. The receiver shall during this period operate the assisted living establishment in a manner designed to guarantee the safety and adequate care of and services to the residents. The receiver shall take no action that impairs the legal rights of a resident of the assisted living establishment. The receiver has authority to make contracts and incur lawful expenses. The receiver shall use the building, fixtures, furnishings, and any accompanying consumable goods in the provision of care and services to the residents during the receivership period. The receiver shall take action as is reasonably necessary to protect or conserve the tangible assets or property during receivership. The receiver shall collect incoming payments from all sources and apply them to the cost incurred in the performance of the receiver's functions. No security interest in any real or personal property comprising the assisted living establishment or contained within it, or in any fixture of the facility, shall be impaired or diminished in priority by the receiver. The receiver shall pay all valid obligations the assisted living establishment incurred during the course of the receivership and may pay obligations incurred prior to the receivership if, in the judgment of the commissioner, these payments must be made to ensure the health, safety, or welfare of the residents, and shall deduct these expenses from rental payments owed to any controlling person by virtue of the receivership. The receiver has authority to hire, direct, manage, and discharge any employees of the assisted living establishment including the administrator, director of nursing, medical director, manager of the establishment, or affiliated home care provider.

(b) Nothing in this section shall relieve any owner, operator, or controlling person of an assisted living establishment placed in receivership of any civil or criminal liability incurred, or any duty imposed by law, by reason of acts or omissions of the owner, licensee, or controlling person prior to the order for receivership under this section, nor shall anything contained in this section be construed to suspend during the receivership any obligation of the owner, licensee, or controlling person for payment of taxes or other operating and maintenance expenses of the assisted living establishment nor of the owner, licensee, or controlling person or any other person for the payment of mortgages or liens.

Subd. 5. Receiver's fee; liability; commissioner assistance. The commissioner, as receiver appointed by the court, may hire a managing agent to work on the commissioner's behalf to operate the assisted living establishment during the receivership, and that managing agent is entitled to a reasonable fee. The receiver and its managing agent shall be liable only in an official capacity for injury to person and property by reason of the conditions of the assisted living establishment. The receiver and its managing agent shall not be personally liable, except for gross negligence and intentional acts. The commissioner shall assist the managing agent in carrying out its duties.

Subd. 6. Termination. Receivership imposed pursuant to this section shall terminate 18 months after the date on which it was ordered, or at any other time designated by the court, or upon the occurrence of any of the following events:

(1) a determination by the commissioner that the assisted living establishment's license should be renewed or should not be suspended or revoked;

(2) the granting of a new license to the assisted living establishment; or

(3) a determination by the commissioner that all of the residents of the assisted living establishment have been provided alternative health care or services, either in another assisted living establishment or otherwise.

Subd. 7. Postreceivership period; establishment remaining open. If an assisted living establishment remains open after the receivership is concluded, a new operator is only legally responsible under state law for its actions after the receivership has concluded.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 30. **[144I.18] PLACEMENT OF MONITOR.**

Subdivision 1. Authority. The commissioner may place a person to act as a monitor in an assisted living establishment in any of the following circumstances:

(1) in any situation for which a receiver may be appointed under section 144I.17; or

(2) when the commissioner determines that violations of this chapter, or sections 144J.06, 144J.07, 144J.08, 144J.09, 144J.12, or 626.557, or rules or regulations adopted under those provisions, require extended surveillance to enforce compliance or to protect the health, safety, or welfare of the residents.

Subd. 2. Duties of monitor. The monitor shall observe the operation of the assisted living establishment; provide advice to the establishment on methods of complying with state law and rules, where documented deficiencies from the law or rules exist; and periodically shall submit a written report to the commissioner on the ways in which the assisted living establishment meets or fails to meet state law or rules.

Subd. 3. Selection of monitor. The commissioner may select as monitor an employee of the department or may contract with any other individual to serve as a monitor. The commissioner must publish a notice in the State Register that requests proposals from individuals who wish to be considered for placement as monitors and that describes the criteria for selecting individuals as monitors. The commissioner must maintain a list of individuals who are not employees of the department who are interested in serving as monitors. The commissioner may contract with those individuals determined to be qualified.

Subd. 4. Payment of monitor. An assisted living establishment in which a monitor is placed must pay to the department the actual cost associated with the placement, unless payment would create an undue hardship for the assisted living establishment.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 31. **[144I.19] EXPEDITED RULEMAKING.**

The commissioner shall adopt rules to carry out this chapter using the expedited rulemaking process under section 14.389, including rules establishing standards identified in sections 144I.13 and 144I.14.

EFFECTIVE DATE. This section is effective the day following final enactment.

ARTICLE 5
MISCELLANEOUS

Section 1. Minnesota Statutes 2018, section 144A.4791, subdivision 10, is amended to read:

Subd. 10. **Termination of service plan.** (a) ~~If a~~ An unaffiliated home care provider must provide at least 30 days' advance notice of termination of a client's service plan.

(b) If an unaffiliated home care provider terminates a service plan with a client, and the client continues to need home care services, the home care provider shall provide the client and the client's representative, if any, with a written notice of termination which includes the following information:

(1) the effective date of termination;

(2) the reason for termination;

(3) a list of known licensed home care providers in the client's immediate geographic area;

(4) a statement that the unaffiliated home care provider will participate in a coordinated transfer of care of the client to another home care provider, health care provider, or caregiver, ~~as required by the home care bill of rights, section 144A.44, subdivision 1, clause (17);~~

(5) the name and contact information of a person employed by the unaffiliated home care provider with whom the client may discuss the notice of termination; and

(6) if applicable, a statement that the notice of termination of home care services does not constitute notice of termination of the assisted living establishment or housing with services contract with an assisted living establishment or a housing with services establishment.

~~(b)~~ (c) When the unaffiliated home care provider voluntarily discontinues services to all clients, the unaffiliated home care provider must notify the commissioner, lead agencies, and ombudsman for long-term care about its clients and comply with the requirements in this subdivision.

(d) For the purposes of this subdivision:

(1) "assisted living establishment" has the meaning given in section 144J.01, subdivision 6. Assisted living establishment does not include a housing with services establishment defined in section 144D.01, subdivision 4; and

(2) "unaffiliated home care provider" has the meaning given in section 144J.01, subdivision 15.

EFFECTIVE DATE. This section is effective August 1, 2019.

Sec. 2. Minnesota Statutes 2018, section 325F.72, subdivision 1, is amended to read:

Subdivision 1. **Persons to whom disclosure is required.** ~~Housing with services establishments, as defined in sections 144D.01 to 144D.07, (a) Assisted living establishments, as defined in section 144J.01, subdivision 6, that secure, segregate, or provide a special program or special unit for residents with a diagnosis of probable Alzheimer's disease or a related disorder or that advertise, market, or otherwise promote the establishment as providing specialized care for Alzheimer's disease or a related disorder are considered a "special care unit." All special care units shall provide a written disclosure to the following:~~

- (1) the commissioner of health, if requested;
- (2) the Office of Ombudsman for Long-Term Care; and
- (3) each person seeking placement within a residence, or the ~~person's authorized~~ resident's designated representative, as defined in section 144J.01, subdivision 9, before an agreement to provide the care is entered into.

EFFECTIVE DATE. This section is effective July 1, 2020.

Sec. 3. **REPEALER.**

Minnesota Statutes 2018, sections 144D.01, subdivision 6; 144D.025; 144D.065; 144D.066; 144G.01; 144G.02; 144G.03, subdivisions 1, 2, 3, 4, and 5; 144G.05; and 144G.06, are repealed effective July 1, 2020.

ARTICLE 6

OFFICE OF HEALTH FACILITY COMPLAINTS; MINNESOTA VULNERABLE ADULTS ACT

Section 1. Minnesota Statutes 2018, section 144A.10, subdivision 1, is amended to read:

Subdivision 1. **Enforcement authority.** The commissioner of health is the exclusive state agency charged with the responsibility and duty of inspecting all facilities required to be licensed under section 144A.02, and issuing correction orders and imposing fines as provided in this section, Minnesota Rules, chapter 4658, or any other applicable law. The commissioner of health shall enforce the rules established pursuant to sections 144A.01 to 144A.155, subject only to the authority of the Department of Public Safety respecting the enforcement of fire and safety standards in nursing homes and the responsibility of the commissioner of human services under sections 245A.01 to 245A.16 or 252.28.

The commissioner may request and must be given access to relevant information, records, incident reports, or other documents in the possession of a licensed facility if the commissioner considers them necessary for the discharge of responsibilities. For the purposes of inspections and securing information to determine compliance with the licensure laws and rules, the commissioner need not present a release, waiver, or consent of the individual. A nursing home's refusal to cooperate in providing lawfully requested information is grounds for a correction order, a fine according to Minnesota Rules, part 4658.0190, item EE, or both. The identities of patients or residents must be kept private as defined by section 13.02, subdivision 12.

Sec. 2. Minnesota Statutes 2018, section 144A.45, subdivision 1, is amended to read:

Subdivision 1. **Regulations.** The commissioner shall regulate home care providers pursuant to sections 144A.43 to 144A.482. The regulations shall include the following:

- (1) provisions to assure, to the extent possible, the health, safety, well-being, and appropriate treatment of persons who receive home care services while respecting a client's autonomy and choice;

- (2) requirements that home care providers furnish the commissioner with specified information necessary to implement sections 144A.43 to 144A.482;
- (3) standards of training of home care provider personnel;
- (4) standards for provision of home care services;
- (5) standards for medication management;
- (6) standards for supervision of home care services;
- (7) standards for client evaluation or assessment;
- (8) requirements for the involvement of a client's health care provider, the documentation of health care providers' orders, if required, and the client's service plan;
- (9) standards for the maintenance of accurate, current client records;
- (10) the establishment of basic and comprehensive levels of licenses based on services provided; and
- (11) provisions to enforce these regulations and the home care bill of rights, including provisions for issuing penalties and fines according to section 144A.474, subdivision 11, for violations of sections 144A.43 to 144A.482.

Sec. 3. Minnesota Statutes 2018, section 144A.45, subdivision 2, is amended to read:

Subd. 2. **Regulatory functions.** The commissioner shall:

- (1) license, survey, and monitor without advance notice, home care providers in accordance with sections 144A.43 to 144A.482;
- (2) survey every temporary licensee within one year of the temporary license issuance date subject to the temporary licensee providing home care services to a client or clients;
- (3) survey all licensed home care providers on an interval that will promote the health and safety of clients;
- (4) with the consent of the client, visit the home where services are being provided;
- (5) issue correction orders and assess civil penalties in accordance with ~~section~~ sections 144.653, subdivisions 5 to 8, 144A.474, and 144A.475, for violations of sections 144A.43 to 144A.482;
- (6) take action as authorized in section 144A.475; and
- (7) take other action reasonably required to accomplish the purposes of sections 144A.43 to 144A.482.

Sec. 4. Minnesota Statutes 2018, section 144A.474, subdivision 8, is amended to read:

Subd. 8. **Correction orders.** (a) A correction order may be issued whenever the commissioner finds upon survey or during a complaint investigation that a home care provider, a managerial official, or an employee of the provider is not in compliance with sections 144A.43 to 144A.482. The correction order shall cite the specific statute and document areas of noncompliance and the time allowed for correction. In addition to issuing a correction order, the commissioner may impose an immediate fine as provided in subdivision 11.

(b) The commissioner shall mail copies of any correction order to the last known address of the home care provider, or electronically scan the correction order and e-mail it to the last known home care provider e-mail address, within 30 calendar days after the survey exit date. A copy of each correction order, the amount of any immediate fine issued, the correction plan, and copies of any documentation supplied to the commissioner shall be kept on file by the home care provider, and public documents shall be made available for viewing by any person upon request. Copies may be kept electronically.

(c) By the correction order date, the home care provider must document in the provider's records any action taken to comply with the correction order. The commissioner may request a copy of this documentation and the home care provider's action to respond to the correction order in future surveys, upon a complaint investigation, and as otherwise needed.

Sec. 5. Minnesota Statutes 2018, section 144A.474, subdivision 9, is amended to read:

Subd. 9. **Follow-up surveys.** For providers that have Level 3 or Level 4 violations under subdivision 11, or any violations determined to be widespread, the department shall conduct a follow-up survey within 90 calendar days of the survey. When conducting a follow-up survey, the surveyor will focus on whether the previous violations have been corrected and may also address any new violations that are observed while evaluating the corrections that have been made. If a new violation is identified on a follow-up survey, ~~no fine will be imposed unless it is not corrected on the next follow-up survey~~ the surveyor shall issue a correction order for the new violation and may impose an immediate fine for the new violation.

Sec. 6. Minnesota Statutes 2018, section 144A.474, subdivision 11, is amended to read:

Subd. 11. **Fines.** (a) Fines and enforcement actions under this subdivision may be assessed based on the level and scope of the violations described in paragraph (c) as follows:

(1) Level 1, no fines or enforcement;

(2) Level 2, fines ranging from \$0 to \$500, in addition to any of the enforcement mechanisms authorized in section 144A.475 for widespread violations;

(3) Level 3, fines ranging from \$500 to \$1,000, in addition to any of the enforcement mechanisms authorized in section 144A.475; and

(4) Level 4, fines ranging from \$1,000 to \$5,000, in addition to any of the enforcement mechanisms authorized in section 144A.475.

(b) Correction orders for violations are categorized by both level and scope and fines shall be assessed as follows:

(1) level of violation:

(i) Level 1 is a violation that has no potential to cause more than a minimal impact on the client and does not affect health or safety;

(ii) Level 2 is a violation that did not harm a client's health or safety but had the potential to have harmed a client's health or safety, but was not likely to cause serious injury, impairment, or death;

(iii) Level 3 is a violation that harmed a client's health or safety, not including serious injury, impairment, or death, or a violation that has the potential to lead to serious injury, impairment, or death; and

(iv) Level 4 is a violation that results in serious injury, impairment, or death.

(2) scope of violation:

(i) isolated, when one or a limited number of clients are affected or one or a limited number of staff are involved or the situation has occurred only occasionally;

(ii) pattern, when more than a limited number of clients are affected, more than a limited number of staff are involved, or the situation has occurred repeatedly but is not found to be pervasive; and

(iii) widespread, when problems are pervasive or represent a systemic failure that has affected or has the potential to affect a large portion or all of the clients.

(c) If the commissioner finds that the applicant or a home care provider required to be licensed under sections 144A.43 to 144A.482 has not corrected violations by the date specified in the correction order or conditional license resulting from a survey or complaint investigation, the commissioner may impose ~~a~~ an additional fine for noncompliance with a correction order. A notice of noncompliance with a correction order must be mailed to the applicant's or provider's last known address. ~~The noncompliance notice of noncompliance with a correction order~~ must list the violations not corrected and any fines imposed.

(d) The license holder must pay the fines assessed on or before the payment date specified on a correction order or on a notice of noncompliance with a correction order. If the license holder fails to ~~fully comply with the order~~ pay a fine by the specified date, the commissioner may issue a ~~second~~ late payment fine or suspend the license until the license holder ~~complies by paying the fine~~ pays all outstanding fines. A timely appeal shall stay payment of the late payment fine until the commissioner issues a final order.

(e) A license holder shall promptly notify the commissioner in writing when a violation specified in ~~the order~~ a notice of noncompliance with a correction order is corrected. If upon reinspection the commissioner determines that a violation has not been corrected as indicated by the ~~order~~ notice of noncompliance with a correction order, the commissioner may issue ~~a second~~ an additional fine for noncompliance with a notice of noncompliance with a correction order. The commissioner shall notify the license holder by mail to the last known address in the licensing record that ~~a second~~ an additional fine has been assessed. The license holder may appeal the ~~second~~ additional fine as provided under this subdivision.

(f) A home care provider that has been assessed a fine under this subdivision or subdivision 8 has a right to a reconsideration or a hearing under this section and chapter 14.

(g) When a fine has been assessed, the license holder may not avoid payment by closing, selling, or otherwise transferring the licensed program to a third party. In such an event, the license holder shall be liable for payment of the fine.

(h) In addition to any fine imposed under this section, the commissioner may assess costs related to an investigation that results in a final order assessing a fine or other enforcement action authorized by this chapter.

(i) Fines collected under this subdivision shall be deposited in the state government special revenue fund and credited to an account separate from the revenue collected under section 144A.472. Subject to an appropriation by the legislature, the revenue from the fines collected must be used by the commissioner for special projects to improve home care in Minnesota as recommended by the advisory council established in section 144A.4799.

Sec. 7. Minnesota Statutes 2018, section 144A.53, subdivision 1, is amended to read:

Subdivision 1. **Powers.** The director may:

(1) promulgate by rule, pursuant to chapter 14, and within the limits set forth in subdivision 2, the methods by which complaints against health facilities, health care providers, home care providers, ~~or residential care homes~~, or administrative agencies are to be made, reviewed, investigated, and acted upon; provided, however, that a fee may not be charged for filing a complaint;

(2) recommend legislation and changes in rules to the state commissioner of health, governor, administrative agencies or the federal government;

(3) investigate, upon a complaint or upon initiative of the director, any action or failure to act by a health care provider, home care provider, ~~residential care home~~, or a health facility;

(4) request and receive access to relevant information, records, incident reports, or documents in the possession of an administrative agency, a health care provider, a home care provider, ~~a residential care home~~, or a health facility, and issue investigative subpoenas to individuals and facilities for oral information and written information, including privileged information which the director deems necessary for the discharge of responsibilities. For purposes of investigation and securing information to determine violations, the director need not present a release, waiver, or consent of an individual. The identities of patients or residents must be kept private as defined by section 13.02, subdivision 12;

(5) enter and inspect, at any time, a health facility ~~or residential care home~~ and be permitted to interview staff; provided that the director shall not unduly interfere with or disturb the provision of care and services within the facility ~~or home~~ or the activities of a patient or resident unless the patient or resident consents;

(6) issue correction orders and assess civil fines ~~pursuant to section~~ for violations of sections 144.651, 144.653, 144A.10, 144A.45, and 626.557, Minnesota Rules, chapters 4655, 4658, 4664, and 4665, or any other law which that provides for the issuance of correction orders to health facilities or home care provider, or under section 144A.45. The director may use the authority in section 144A.474, subdivision 11, to calculate the fine amount. A facility's or home's refusal to cooperate in providing lawfully requested information within the requested time period may also be grounds for a correction order or fine at a Level 2 fine pursuant to section 144A.474, subdivision 11;

(7) recommend the certification or decertification of health facilities pursuant to Title XVIII or XIX of the United States Social Security Act;

(8) assist patients or residents of health facilities ~~or residential care homes~~ in the enforcement of their rights under Minnesota law; and

(9) work with administrative agencies, health facilities, home care providers, residential care homes, and health care providers and organizations representing consumers on programs designed to provide information about health facilities to the public and to health facility residents.

Sec. 8. Minnesota Statutes 2018, section 144A.53, is amended by adding a subdivision to read:

Subd. 5. **Safety and quality improvement technical panel.** The director shall establish an expert technical panel to examine and make recommendations, on an ongoing basis, on how to apply proven safety and quality improvement practices and infrastructure to settings and providers that provide long-term services and supports. The technical panel must include representation from nonprofit Minnesota-based organizations dedicated to patient safety or innovation in health care safety and quality, Department of Health staff with expertise in issues related to

adverse health events, the University of Minnesota, organizations representing long-term care providers and home care providers in Minnesota, national patient safety experts, and other experts in the safety and quality improvement field. The technical panel shall periodically provide recommendations to the legislature on legislative changes needed to promote safety and quality improvement practices in long-term care settings and with long-term care providers.

Sec. 9. Minnesota Statutes 2018, section 144A.53, is amended by adding a subdivision to read:

Subd. 6. **Training and operations panel.** (a) The director shall establish a training and operations panel within the Office of Health Facility Complaints to examine and make recommendations, on an ongoing basis, on continual improvements to the operation of the office. The training and operations panel shall be composed of office staff, including investigators and intake and triage staff; one or more representatives of the commissioner's office; and employees from any other divisions in the Department of Health with relevant knowledge or expertise. The training and operations panel may also consult with employees from other agencies in state government with relevant knowledge or expertise.

(b) The training and operations panel shall examine and make recommendations to the director and the commissioner regarding introducing or refining office systems, procedures, and staff training in order to improve office and staff efficiency; enhance communications between the office, health care facilities, home care providers, and residents or clients; and provide for appropriate, effective protection for vulnerable adults through rigorous investigations and enforcement of laws. Panel duties include but are not limited to:

(1) developing the office's training processes to adequately prepare and support investigators in performing their duties;

(2) developing clear, consistent internal policies for conducting investigations as required by federal law, including policies to ensure staff meet the deadlines in state and federal laws for triaging, investigating, and making final dispositions of cases involving maltreatment, and procedures for notifying the vulnerable adult, reporter, and facility of any delays in investigations; communicating these policies to staff in a clear, timely manner; and developing procedures to evaluate and modify these internal policies on an ongoing basis;

(3) developing and refining quality control measures for the intake and triage processes, through such practices as reviewing a random sample of the triage decisions made in case reports or auditing a random sample of the case files to ensure the proper information is being collected, the files are being properly maintained, and consistent triage and investigations determinations are being made;

(4) developing and maintaining systems and procedures to accurately determine the situations in which the office has jurisdiction over a maltreatment allegation;

(5) developing and maintaining audit procedures for investigations to ensure investigators obtain and document information necessary to support decisions;

(6) following a maltreatment determination, developing and maintaining procedures to clearly communicate the appeal or review rights of all parties upon final disposition; and

(7) continuously upgrading the information on and utility of the office's website through such steps as providing clear, detailed information about the appeal or review rights of vulnerable adults, alleged perpetrators, and providers and facilities.

Sec. 10. Minnesota Statutes 2018, section 144A.53, is amended by adding a subdivision to read:

Subd. 7. Posting maltreatment reports. (a) The director shall post on the Department of Health website the following information for the most recent five-year period:

(1) the public portions of all substantiated reports of maltreatment of a vulnerable adult at a facility or by a provider for which the Department of Health is the lead investigative agency under section 626.557; and

(2) whether the facility or provider has requested reconsideration or initiated any type of dispute resolution or appeal of a substantiated maltreatment report.

(b) Following a reconsideration, dispute resolution, or appeal, the director must update the information posted under this subdivision to reflect the results of the reconsideration, dispute resolution, or appeal.

(c) The information posted under this subdivision must be posted in coordination with other divisions or sections at the Department of Health and in a manner that does not duplicate information already published by the Department of Health, and must be posted in a format that allows consumers to search the information by facility or provider name and by the physical address of the facility or the local business address of the provider.

Sec. 11. Minnesota Statutes 2018, section 626.557, subdivision 4, is amended to read:

Subd. 4. Reporting. (a) Except as provided in paragraph (b), a mandated reporter shall immediately make an oral report to the common entry point. The common entry point may accept electronic reports submitted through a web-based reporting system established by the commissioner. Use of a telecommunications device for the deaf or other similar device shall be considered an oral report. The common entry point may not require written reports. To the extent possible, the report must be of sufficient content to identify the vulnerable adult, the caregiver, the nature and extent of the suspected maltreatment, any evidence of previous maltreatment, the name and address of the reporter, the time, date, and location of the incident, and any other information that the reporter believes might be helpful in investigating the suspected maltreatment. The common entry point must provide a way to record that the reporter has electronic evidence to submit. A mandated reporter may disclose not public data, as defined in section 13.02, and medical records under sections 144.291 to 144.298, to the extent necessary to comply with this subdivision.

(b) A boarding care home that is licensed under sections 144.50 to 144.58 and certified under Title 19 of the Social Security Act, a nursing home that is licensed under section 144A.02 and certified under Title 18 or Title 19 of the Social Security Act, or a hospital that is licensed under sections 144.50 to 144.58 and has swing beds certified under Code of Federal Regulations, title 42, section 482.66, may submit a report electronically to the common entry point instead of submitting an oral report. The report may be a duplicate of the initial report the facility submits electronically to the commissioner of health to comply with the reporting requirements under Code of Federal Regulations, title 42, section 483.13. The commissioner of health may modify these reporting requirements to include items required under paragraph (a) that are not currently included in the electronic reporting form.

Sec. 12. Minnesota Statutes 2018, section 626.557, subdivision 9c, is amended to read:

Subd. 9c. Lead investigative agency; notifications, dispositions, determinations. (a) ~~Upon request of the reporter,~~ The lead investigative agency shall notify the reporter that it has received the report, and provide information on the initial disposition of the report within five business days of receipt of the report, provided that the notification will not endanger the vulnerable adult or hamper the investigation.

(b) Except to the extent prohibited by federal law, when the Department of Health is the lead investigative agency, the agency must provide the following information to the vulnerable adult or the vulnerable adult's guardian or health care agent, if known, within five days after the initiation of an investigation, provided that the provision of the information will not hamper the investigation or harm the vulnerable adult:

(1) the maltreatment allegations by types: abuse, neglect, financial exploitation, and drug diversion;

(2) the name of the facility or other location at which alleged maltreatment occurred;

(3) the dates of the alleged maltreatment if identified in the report at the time of the lead investigative agency disclosure;

(4) the name and contact information for the investigator or other information as requested and allowed under law; and

(5) confirmation of whether the lead investigative agency is investigating the matter and, if so:

(i) an explanation of the process;

(ii) an estimated timeline for the investigation;

(iii) a notification that the vulnerable adult or the vulnerable adult's guardian or health care agent may electronically submit evidence to support the maltreatment report, including but not limited to photographs, videos, and documents; and

(iv) a statement that the lead investigative agency will provide an update on the investigation upon request by the vulnerable adult or the vulnerable adult's guardian or health care agent and a report when the investigation is concluded.

(c) If the Department of Health is the lead investigative agency, the Department of Health shall provide maltreatment information, to the extent allowed under state and federal law, including any reports, upon request of the vulnerable adult that is the subject of a maltreatment report or upon request of that vulnerable adult's guardian or health care agent.

(d) If the common entry point data indicates that the reporter has electronic evidence, the lead investigative agency shall seek to receive such evidence prior to making a determination that the lead investigative agency will not investigate the matter. Nothing in this paragraph requires the lead investigative agency to stop investigating prior to receipt of the electronic evidence nor prevents the lead investigative agency from closing the investigation prior to receipt of the electronic evidence if, in the opinion of the investigator, the evidence is not necessary to the determination.

(e) The lead investigative agency may assign multiple reports of maltreatment for the same or separate incidences related to the same vulnerable adult to the same investigator, as deemed appropriate.

(f) Reports related to the same vulnerable adult, the same incident, or the same alleged perpetrator, facility, or licensee must be cross-referenced.

(g) Upon conclusion of every investigation it conducts, the lead investigative agency shall make a final disposition as defined in section 626.5572, subdivision 8.

(e) (h) When determining whether the facility or individual is the responsible party for substantiated maltreatment or whether both the facility and the individual are responsible for substantiated maltreatment, the lead investigative agency shall consider at least the following mitigating factors:

(1) whether the actions of the facility or the individual caregivers were in accordance with, and followed the terms of, an erroneous physician order, prescription, resident care plan, or directive. This is not a mitigating factor when the facility or caregiver is responsible for the issuance of the erroneous order, prescription, plan, or directive or knows or should have known of the errors and took no reasonable measures to correct the defect before administering care;

(2) the comparative responsibility between the facility, other caregivers, and requirements placed upon the employee, including but not limited to, the facility's compliance with related regulatory standards and factors such as the adequacy of facility policies and procedures, the adequacy of facility training, the adequacy of an individual's participation in the training, the adequacy of caregiver supervision, the adequacy of facility staffing levels, and a consideration of the scope of the individual employee's authority; and

(3) whether the facility or individual followed professional standards in exercising professional judgment.

(d) (i) When substantiated maltreatment is determined to have been committed by an individual who is also the facility license holder, both the individual and the facility must be determined responsible for the maltreatment, and both the background study disqualification standards under section 245C.15, subdivision 4, and the licensing actions under section 245A.06 or 245A.07 apply.

(e) (j) The lead investigative agency shall complete its final disposition within 60 calendar days. If the lead investigative agency is unable to complete its final disposition within 60 calendar days, the lead investigative agency shall notify the following persons provided that the notification will not endanger the vulnerable adult or hamper the investigation: (1) the vulnerable adult or the vulnerable adult's guardian or health care agent, when known, if the lead investigative agency knows them to be aware of the investigation; and (2) the facility, where applicable. The notice shall contain the reason for the delay and the projected completion date. If the lead investigative agency is unable to complete its final disposition by a subsequent projected completion date, the lead investigative agency shall again notify the vulnerable adult or the vulnerable adult's guardian or health care agent, when known if the lead investigative agency knows them to be aware of the investigation, and the facility, where applicable, of the reason for the delay and the revised projected completion date provided that the notification will not endanger the vulnerable adult or hamper the investigation. The lead investigative agency must notify the health care agent of the vulnerable adult only if the health care agent's authority to make health care decisions for the vulnerable adult is currently effective under section 145C.06 and not suspended under section 524.5-310 and the investigation relates to a duty assigned to the health care agent by the principal. A lead investigative agency's inability to complete the final disposition within 60 calendar days or by any projected completion date does not invalidate the final disposition.

(f) (k) Within ten calendar days of completing the final disposition, the lead investigative agency shall provide a copy of the public investigation memorandum under subdivision 12b, paragraph (b), clause (1) (d), when required to be completed under this section, to the following persons:

(1) the vulnerable adult, or the vulnerable adult's guardian or health care agent, if known, unless the lead investigative agency knows that the notification would endanger the well-being of the vulnerable adult;

(2) the reporter, if unless the reporter requested notification otherwise when making the report, provided this notification would not endanger the well-being of the vulnerable adult;

(3) the alleged perpetrator, if known;

(4) the facility; ~~and~~

(5) the ombudsman for long-term care, or the ombudsman for mental health and developmental disabilities, as appropriate;

(6) law enforcement; and

(7) the county attorney, as appropriate.

~~(g)~~ (l) If, as a result of a reconsideration, review, or hearing, the lead investigative agency changes the final disposition, or if a final disposition is changed on appeal, the lead investigative agency shall notify the parties specified in paragraph ~~(f)~~ (k).

~~(h)~~ (m) The lead investigative agency shall notify the vulnerable adult who is the subject of the report or the vulnerable adult's guardian or health care agent, if known, and any person or facility determined to have maltreated a vulnerable adult, of their appeal or review rights under this section or section 256.021.

~~(i)~~ (n) The lead investigative agency shall routinely provide investigation memoranda for substantiated reports to the appropriate licensing boards. These reports must include the names of substantiated perpetrators. The lead investigative agency may not provide investigative memoranda for inconclusive or false reports to the appropriate licensing boards unless the lead investigative agency's investigation gives reason to believe that there may have been a violation of the applicable professional practice laws. If the investigation memorandum is provided to a licensing board, the subject of the investigation memorandum shall be notified and receive a summary of the investigative findings.

~~(j)~~ (o) In order to avoid duplication, licensing boards shall consider the findings of the lead investigative agency in their investigations if they choose to investigate. This does not preclude licensing boards from considering other information.

~~(k)~~ (p) The lead investigative agency must provide to the commissioner of human services its final dispositions, including the names of all substantiated perpetrators. The commissioner of human services shall establish records to retain the names of substantiated perpetrators.

Sec. 13. Minnesota Statutes 2018, section 626.557, subdivision 12b, is amended to read:

Subd. 12b. **Data management.** (a) In performing any of the duties of this section as a lead investigative agency, the county social service agency shall maintain appropriate records. Data collected by the county social service agency under this section are welfare data under section 13.46. Notwithstanding section 13.46, subdivision 1, paragraph (a), data under this paragraph that are inactive investigative data on an individual who is a vendor of services are private data on individuals, as defined in section 13.02. The identity of the reporter may only be disclosed as provided in paragraph ~~(e)~~ (g).

(b) Data maintained by the common entry point are ~~confidential~~ private data on individuals or ~~protected~~ nonpublic data as defined in section 13.02, provided that the name of the reporter is confidential data on individuals. Notwithstanding section 138.163, the common entry point shall maintain data for three calendar years after date of receipt and then destroy the data unless otherwise directed by federal requirements.

~~(b)~~ (c) The commissioners of health and human services shall prepare an investigation memorandum for each report alleging maltreatment investigated under this section. County social service agencies must maintain private data on individuals but are not required to prepare an investigation memorandum. During an investigation by the commissioner of health or the commissioner of human services, data collected under this section are confidential

data on individuals or protected nonpublic data as defined in section 13.02, provided that data, other than data on the reporter, may be shared with the vulnerable adult or guardian or health care agent if the lead investigative agency determines that sharing of the data is needed to protect the vulnerable adult. Upon completion of the investigation, the data are classified as provided in ~~clauses (1) to (3) and paragraph (e) paragraphs (d) to (g).~~

~~(1)~~ (d) The investigation memorandum must contain the following data, which are public:

~~(i)~~ (1) the name of the facility investigated;

~~(ii)~~ (2) a statement of the nature of the alleged maltreatment;

~~(iii)~~ (3) pertinent information obtained from medical or other records reviewed;

~~(iv)~~ (4) the identity of the investigator;

~~(v)~~ (5) a summary of the investigation's findings;

~~(vi)~~ (6) statement of whether the report was found to be substantiated, inconclusive, false, or that no determination will be made;

~~(vii)~~ (7) a statement of any action taken by the facility;

~~(viii)~~ (8) a statement of any action taken by the lead investigative agency; and

~~(ix)~~ (9) when a lead investigative agency's determination has substantiated maltreatment, a statement of whether an individual, individuals, or a facility were responsible for the substantiated maltreatment, if known.

The investigation memorandum must be written in a manner which protects the identity of the reporter and of the vulnerable adult and may not contain the names or, to the extent possible, data on individuals or private data on individuals listed in ~~clause (2) paragraph (e).~~

~~(2)~~ (e) Data on individuals collected and maintained in the investigation memorandum are private data on individuals, including:

~~(i)~~ (1) the name of the vulnerable adult;

~~(ii)~~ (2) the identity of the individual alleged to be the perpetrator;

~~(iii)~~ (3) the identity of the individual substantiated as the perpetrator; and

~~(iv)~~ (4) the identity of all individuals interviewed as part of the investigation.

~~(3)~~ (f) Other data on individuals maintained as part of an investigation under this section are private data on individuals upon completion of the investigation.

~~(e)~~ (g) After the assessment or investigation is completed, the name of the reporter must be confidential, except:

(1) the subject of the report may compel disclosure of the name of the reporter only with the consent of the reporter; or

(2) upon a written finding by a court that the report was false and there is evidence that the report was made in bad faith.

This subdivision does not alter disclosure responsibilities or obligations under the Rules of Criminal Procedure, except that where the identity of the reporter is relevant to a criminal prosecution, the district court shall do an in-camera review prior to determining whether to order disclosure of the identity of the reporter.

(d) (h) Notwithstanding section 138.163, data maintained under this section by the commissioners of health and human services must be maintained under the following schedule and then destroyed unless otherwise directed by federal requirements:

- (1) data from reports determined to be false, maintained for three years after the finding was made;
- (2) data from reports determined to be inconclusive, maintained for four years after the finding was made;
- (3) data from reports determined to be substantiated, maintained for seven years after the finding was made; and
- (4) data from reports which were not investigated by a lead investigative agency and for which there is no final disposition, maintained for three years from the date of the report.

(e) (i) The commissioners of health and human services shall annually publish on their websites the number and type of reports of alleged maltreatment involving licensed facilities reported under this section, the number of those requiring investigation under this section, and the resolution of those investigations. On a biennial basis, the commissioners of health and human services shall jointly report the following information to the legislature and the governor:

(1) the number and type of reports of alleged maltreatment involving licensed facilities reported under this section, the number of those requiring investigations under this section, the resolution of those investigations, and which of the two lead agencies was responsible;

(2) trends about types of substantiated maltreatment found in the reporting period;

(3) ~~if there are upward trends for types of maltreatment substantiated,~~ recommendations for preventing, addressing, and responding to them substantiated maltreatment;

(4) efforts undertaken or recommended to improve the protection of vulnerable adults;

(5) whether and where backlogs of cases result in a failure to conform with statutory time frames and recommendations for reducing backlogs if applicable;

(6) recommended changes to statutes affecting the protection of vulnerable adults; and

(7) any other information that is relevant to the report trends and findings.

(f) (j) Each lead investigative agency must have a record retention policy.

(g) (k) Lead investigative agencies, prosecuting authorities, and law enforcement agencies may exchange not public data, as defined in section 13.02, if the agency or authority requesting the data determines that the data are pertinent and necessary to the requesting agency in initiating, furthering, or completing an investigation under this section. Data collected under this section must be made available to prosecuting authorities and law enforcement officials, local county agencies, and licensing agencies investigating the alleged maltreatment under this section.

The lead investigative agency shall exchange not public data with the vulnerable adult maltreatment review panel established in section 256.021 if the data are pertinent and necessary for a review requested under that section. Notwithstanding section 138.17, upon completion of the review, not public data received by the review panel must be destroyed.

(h) (l) Each lead investigative agency shall keep records of the length of time it takes to complete its investigations.

(i) (m) Notwithstanding paragraph (a) or (b), a lead investigative agency may share common entry point or investigative data and may notify other affected parties, including the vulnerable adult and their authorized representative, if the lead investigative agency has reason to believe maltreatment has occurred and determines the information will safeguard the well-being of the affected parties or dispel widespread rumor or unrest in the affected facility.

(j) (n) Under any notification provision of this section, where federal law specifically prohibits the disclosure of patient identifying information, a lead investigative agency may not provide any notice unless the vulnerable adult has consented to disclosure in a manner which conforms to federal requirements.

Sec. 14. **DIRECTION TO COMMISSIONER OF HEALTH; PROGRESS IN IMPLEMENTING RECOMMENDATIONS OF LEGISLATIVE AUDITOR.**

By March 1, 2020, the commissioner of health must submit a report to the chairs and ranking minority members of the legislative committees with jurisdiction over health, human services, or aging on the progress toward implementing each recommendation of the Office of the Legislative Auditor with which the commissioner agreed in the commissioner's letter to the legislative auditor dated March 1, 2018. The commissioner shall include in the report existing data collected in the course of the commissioner's continuing oversight of the Office of Health Facility Complaints sufficient to demonstrate the implementation of the recommendations with which the commissioner agreed.

Sec. 15. **REPORTS; OFFICE OF HEALTH FACILITY COMPLAINTS' RESPONSE TO VULNERABLE ADULT MALTREATMENT ALLEGATIONS.**

(a) On a quarterly basis until January 2022, and annually thereafter, the commissioner of health must publish on the Department of Health website a report on the Office of Health Facility Complaints' response to allegations of maltreatment of vulnerable adults. The report must include:

(1) a description and assessment of the office's efforts to improve its internal processes and compliance with federal and state requirements concerning allegations of maltreatment of vulnerable adults, including any relevant timelines;

(2)(i) the number of reports received by type of reporter;

(ii) the number of reports investigated;

(iii) the percentage and number of reported cases awaiting triage;

(iv) the number and percentage of open investigations;

(v) the number and percentage of reports that have failed to meet state or federal timelines for triaging, investigating, or making a final disposition of an investigation by cause of delay; and

(vi) processes the office will implement to bring the office into compliance with state and federal timelines for triaging, investigating, and making final dispositions of investigations;

(3) a trend analysis of internal audits conducted by the office; and

(4) trends and patterns in maltreatment of vulnerable adults, licensing violations by facilities or providers serving vulnerable adults, and other metrics as determined by the commissioner.

(b) The commissioner shall maintain on the Department of Health website reports published under this section for at least the past three years.

Sec. 16. **REPORT; SAFETY AND QUALITY IMPROVEMENT PRACTICES.**

By January 15, 2020, the safety and quality improvement technical panel established under Minnesota Statutes, section 144A.53, subdivision 5, shall provide recommendations to the legislature on legislative changes needed to promote safety and quality improvement practices in long-term care settings and with long-term care providers. The recommendations must address:

(1) how to implement a system for adverse health events reporting, learning, and prevention in long-term care settings and with long-term care providers; and

(2) interim actions to improve systems for the timely analysis of reports and complaints submitted to the Office of Health Facility Complaints to identify common themes and key prevention opportunities, and to disseminate key findings to providers across the state for the purposes of shared learning and prevention."

Delete the title and insert:

"A bill for an act relating to health; establishing consumer protections for residents of assisted living establishments; establishing an assisted living establishment license; providing criminal penalties; granting rulemaking authority; adding provisions for processing and enforcement of maltreatment reports; requiring reports; amending Minnesota Statutes 2018, sections 144.057, subdivision 1; 144.0721; 144.122; 144.651, subdivision 1, by adding a subdivision; 144A.10, subdivision 1; 144A.18; 144A.19, subdivision 1; 144A.20, subdivision 1; 144A.21; 144A.23; 144A.24; 144A.251; 144A.2511; 144A.26; 144A.27; 144A.45, subdivisions 1, 2; 144A.474, subdivisions 8, 9, 11; 144A.4791, subdivision 10; 144A.53, subdivision 1, by adding subdivisions; 144D.01, subdivisions 2a, 4, 5, by adding subdivisions; 144D.015; 144D.02; 144D.04, subdivision 1; 144D.05; 144D.06; 144D.09; 144D.10; 144D.11; 325F.72, subdivisions 1, 4; 626.557, subdivisions 4, 9c, 12b; proposing coding for new law in Minnesota Statutes, chapter 144; proposing coding for new law as Minnesota Statutes, chapters 144I; 144J; repealing Minnesota Statutes 2018, sections 144A.44; 144A.441; 144A.442; 144D.01, subdivision 6; 144D.025; 144D.04, subdivisions 2, 3; 144D.045; 144D.065; 144D.066; 144D.07; 144D.09; 144G.01; 144G.02; 144G.03, subdivisions 1, 2, 3, 4, 5, 6; 144G.04; 144G.05; 144G.06."

With the recommendation that when so amended the bill be re-referred to the Judiciary Finance and Civil Law Division.

The report was adopted.

Moran from the Committee on Health and Human Services Policy to which was referred:

H. F. No. 149, A bill for an act relating to health care; prohibiting a health plan company from contractually preventing a pharmacist from informing a patient of a price differential; amending Minnesota Statutes 2018, section 151.214.

Reported the same back with the following amendments:

Page 1, line 20, strike "or given"

Page 1, line 21, strike "the option"

With the recommendation that when so amended the bill be re-referred to the Committee on Commerce.

The report was adopted.

Carlson, L., from the Committee on Ways and Means to which was referred:

H. F. No. 232, A bill for an act relating to agriculture; appropriating additional money for farm advocates and mental health counseling support for farm families and business operators; amending Laws 2017, chapter 88, article 1, section 2, subdivision 5.

Reported the same back with the following amendments:

Delete everything after the enacting clause and insert:

"Section 1. **CANCELLATION.**

Of the amount appropriated to the commissioner of agriculture for the agricultural growth, research, and innovation program for fiscal year 2019 in Laws 2017, chapter 88, article 1, section 2, subdivision 4, \$100,000 is canceled to the general fund.

Sec. 2. **APPROPRIATION.**

(a) \$100,000 in fiscal year 2019 is appropriated from the general fund to the commissioner of agriculture for the following purposes:

(1) \$15,000 is for transfer to the Board of Trustees of the Minnesota State Colleges and Universities to increase compensation for the counselor currently providing statewide mental health counseling support to farm families and business operators through the Minnesota State Agricultural Centers of Excellence. South Central College and Central Lakes College shall serve as the fiscal agents;

(2) \$40,000 is for transfer to the Board of Trustees of the Minnesota State Colleges and Universities to provide additional statewide mental health counseling support to farm families and business operators through the Minnesota State Agricultural Centers of Excellence. South Central College and Central Lakes College shall serve as the fiscal agents;

(3) \$30,000 is for farmer mental health marketing and training coordination; and

(4) \$15,000 is to increase funding for farm advocate services and farmer-lender mediators.

(b) This is a onetime appropriation.

Sec. 3. **EFFECTIVE DATE.**

This act is effective the day following final enactment."

Delete the title and insert:

"A bill for an act relating to agriculture; appropriating additional money for farm advocates, farmer-lender mediators, and mental health counseling support for farm families and business operators."

With the recommendation that when so amended the bill be placed on the General Register.

The report was adopted.

Sundin from the Committee on Labor to which was referred:

H. F. No. 295, A bill for an act relating to wages; modifying wage deductions for credit card charges; amending Minnesota Statutes 2018, section 177.24, by adding a subdivision; repealing Minnesota Rules, part 5200.0080, subpart 7.

Reported the same back with the recommendation that the bill be re-referred to the Committee on Ways and Means.

The report was adopted.

Freiberg from the Committee on Government Operations to which was referred:

H. F. No. 300, A bill for an act relating to state government; specifying judicial jurisdiction for disputes regarding certain public procurement actions; amending Minnesota Statutes 2018, section 471.345, subdivision 14; proposing coding for new law in Minnesota Statutes, chapter 16C.

Reported the same back with the recommendation that the bill be re-referred to the Judiciary Finance and Civil Law Division.

The report was adopted.

Freiberg from the Committee on Government Operations to which was referred:

H. F. No. 489, A bill for an act relating to elections; providing free public transit on election day.

Reported the same back with the recommendation that the bill be re-referred to the Committee on Ways and Means.

The report was adopted.

Moran from the Committee on Health and Human Services Policy to which was referred:

H. F. No. 728, A bill for an act relating to health care; creating licensure and regulations for pharmacy benefit managers; authorizing rulemaking; amending Minnesota Statutes 2018, section 151.21, subdivision 7, by adding a subdivision; proposing coding for new law as Minnesota Statutes, chapter 62W; repealing Minnesota Statutes 2018, sections 151.214, subdivision 2; 151.60; 151.61; 151.62; 151.63; 151.64; 151.65; 151.66; 151.67; 151.68; 151.69; 151.70; 151.71.

Reported the same back with the following amendments:

Page 3, line 9, before "Pharmacy" insert "(a)"

Page 3, after line 20, insert:

"(b) "Pharmacy benefit manager" does not include the Department of Human Services."

Page 3, line 27, after the period, insert "Plan sponsor does not include the Department of Human Services."

Page 3, delete lines 28 to 31 and insert:

"Subd. 17. **Specialty drug.** "Specialty drug" means a prescription drug that:

(1) cannot be routinely dispensed at a majority of retail pharmacies;

(2) is used to treat chronic and complex, or rare, medical conditions; and

(3) meets a majority of the following criteria:

(i) requires special handling or storage;

(ii) requires complex and extended patient education or counseling;

(iii) requires intensive monitoring;

(iv) requires clinical oversight; and

(v) requires product support services."

Page 7, after line 6, insert:

"(6) de-identified claims level information in electronic format that allows the plan sponsor to sort and analyze the following information for each claim:

(i) the drug and quantity for each prescription;

(ii) whether the claim required prior authorization;

(iii) patient cost-sharing paid on each prescription;

(iv) the amount paid to the pharmacy for each prescription, net of the aggregate amount of fees or other assessments imposed on the pharmacy, including point-of-sale and retroactive charges;

(v) any spread between the net amount paid to the pharmacy in item (iv) and the amount charged to the plan sponsor;

(vi) identity of the pharmacy for each prescription;

(vii) whether the pharmacy is, or is not, under common control or ownership with the pharmacy benefit manager;

(viii) whether the pharmacy is, or is not, a preferred pharmacy under the plan;

(ix) whether the pharmacy is, or is not, a mail order pharmacy; and

(x) whether enrollees are required by the plan to use the pharmacy;"

Page 7, line 7, delete "(6)" and insert "(7)"

Page 7, line 9, delete "(7)" and insert "(8)"

Page 7, line 11, delete "(8)" and insert "(9)"

Page 7, line 21, after "client" insert ", and these costs net of all rebates and other fees and payments, direct or indirect, from all sources"

Page 7, delete lines 27 to 31 and insert:

"(3) the aggregate of all fees from all sources, direct or indirect, that the pharmacy benefit manager received for all of the pharmacy benefit manager's health carrier clients, and the amount of these fees for each health carrier client separately;

(4) the aggregate retained rebates and other fees, as listed in clause (3), that the pharmacy benefit manager received from all sources, direct or indirect, that were not passed through to the health carrier;"

Page 7, line 32, after "rebate" insert "and fees" and delete "and"

Page 8, line 1, after "rebate" insert "and fees"

Page 8, line 2, delete the period and insert ": and"

Page 8, after line 2, insert:

"(7) de-identified claims level information in electronic format that allows the commissioner to sort and analyze the following information for each claim:

(i) the drug and quantity for each prescription;

(ii) whether the claim required prior authorization;

(iii) patient cost-sharing paid on each prescription;

(iv) the amount paid to the pharmacy for each prescription, net of the aggregate amount of fees or other assessments imposed on the pharmacy, including point-of-sale and retroactive charges;

(v) any spread between the net amount paid to the pharmacy in item (iv) and the amount charged to the plan sponsor;

(vi) identity of the pharmacy for each prescription;

(vii) whether the pharmacy is, or is not, under common control or ownership with the pharmacy benefit manager;

(viii) whether the pharmacy is, or is not, a preferred pharmacy under the plan;

(ix) whether the pharmacy is, or is not, a mail order pharmacy; and

(x) whether enrollees are required by the plan to use the pharmacy."

Page 8, line 6, after "rebate" insert "and fee"

Page 8, lines 7, 8, and 10, after "rebates" insert "and fees"

Page 8, line 10, delete "drug" and insert "sources, direct or indirect, for all enrollees of a health carrier."

Page 8, delete line 11

Page 15, line 26, after "plan" insert ", if the pharmacist has a written protocol with the prescriber that outlines the class of drugs of the same generation and designed for the same indication that can be substituted and the required communication between the pharmacist and the prescriber"

Page 15, line 31, after "substitution" insert ", in accordance with the written protocol"

Page 15, after line 31, insert:

"Sec. 15. **SEVERABILITY.**

If any provision of this act is held invalid or unenforceable, the remainder of this act is not affected and the provisions of this act are severable."

Renumber the sections in sequence and correct the internal references

With the recommendation that when so amended the bill be re-referred to the Committee on Commerce.

The report was adopted.

Moran from the Committee on Health and Human Services Policy to which was referred:

H. F. No. 733, A bill for an act relating to health; adding security screening systems to ionizing radiation-producing equipment; appropriating money; amending Minnesota Statutes 2018, section 144.121, subdivision 1a, by adding a subdivision.

Reported the same back with the recommendation that the bill be re-referred to the Committee on Ways and Means.

The report was adopted.

Sundin from the Committee on Labor to which was referred:

H. F. No. 769, A bill for an act relating to labor; modifying Public Employment Relations Board data; appropriating money; amending Minnesota Statutes 2018, sections 13.43, subdivision 6; 179A.041, by adding a subdivision; proposing coding for new law in Minnesota Statutes, chapter 13.

Reported the same back with the recommendation that the bill be re-referred to the Committee on Government Operations.

The report was adopted.

Freiberg from the Committee on Government Operations to which was referred:

H. F. No. 803, A bill for an act relating to state government; establishing an Americans with Disabilities Act Notice to Businesses Working Group; requiring a report.

Reported the same back with the recommendation that the bill be re-referred to the Committee on Ways and Means.

The report was adopted.

Moran from the Committee on Health and Human Services Policy to which was referred:

H. F. No. 831, A bill for an act relating to health; modifying circumstances under which health records may be released without patient consent; amending Minnesota Statutes 2018, section 144.293, subdivision 5.

Reported the same back with the recommendation that the bill be re-referred to the Judiciary Finance and Civil Law Division.

The report was adopted.

Freiberg from the Committee on Government Operations to which was referred:

H. F. No. 841, A bill for an act relating to state government; enacting the Women of Color Opportunity Act; creating pilot projects; requiring a report; appropriating money.

Reported the same back with the following amendments:

Page 1, line 18, after the semicolon, insert "and"

Page 2, line 2, delete "; and" and insert a period

Page 2, delete line 3

Page 2, line 17, delete "located in Ramsey County"

Page 4, line 22, delete everything after "girls"

Page 4, line 23, delete everything before the second "of" and delete everything after the period

Page 4, delete lines 24 to 26

Page 4, line 27, delete everything before "Instruction"

Page 6, line 1, delete "one grant" and insert "grants"

Page 6, line 2, delete the first "an" and delete "organization" and insert "organizations" and delete everything after "color"

Page 6, line 3, delete everything before the period

Page 6, line 14, delete "The Ramsey County grant recipient" and insert "Together, the grant recipients"

Page 6, line 16, delete everything before "may" and insert "organizations" and delete everything after the period

Page 6, delete lines 17 and 18

Page 7, line 14, delete "one grant" and insert "grants" and delete "an" and delete "organization" and insert "organizations"

Page 7, line 15, delete everything after "color"

Page 7, line 16, delete everything before the period

Page 7, line 21, delete "The Ramsey County grant recipient" and insert "Together, the grant recipients"

Page 7, line 22, delete "counties in the Twin Cities metropolitan area" and insert "organizations" and delete everything after the period

Page 7, delete lines 23 and 24

Page 8, after line 14, insert:

"ARTICLE 7

WOMEN'S FOUNDATION OF MINNESOTA INTERNSHIP PROGRAM

Section 1. **APPROPRIATION.**

(a) \$..... in fiscal year 2020 and \$..... in fiscal year 2021 are appropriated from the general fund to the commissioner of employment and economic development for a grant to the Women's Foundation of Minnesota to create and administer a statewide internship program for young women 17 years old or older and under 25 who are American Indian, Asian, Black, or Hispanic. This program shall connect participants with internships in the public, private, and nonprofit sectors and subsidize intern wages. These funds are available until June 30, 2022.

(b) By January 15, 2022, the commissioner shall submit to the legislative committees of the house of representatives and the senate having jurisdiction over economic development and workforce development policy and finance a report detailing the use of grant funds and program outcomes. Where data is available, data in the report should be disaggregated by race, cultural group, family income, geographic location, status as a migrant or foreign immigrant, home language, English learners under Minnesota Statutes, section 124D.59, disability, and status of homelessness.

Amend the title as follows:

Page 1, line 3, delete "a report" and insert "reports"

With the recommendation that when so amended the bill be re-referred to the Committee on Ways and Means.

The report was adopted.

Carlson, L., from the Committee on Ways and Means to which was referred:

H. F. No. 861, A bill for an act relating to transportation; appropriating money for the Minnesota Licensing and Registration System (MNLARS) and Driver and Vehicle Services; requiring a report.

Reported the same back with the following amendments:

Delete everything after the enacting clause and insert:

"Section 1. DEFICIENCY FUNDING REQUEST FOR MNLARS AND DRIVER'S LICENSE SYSTEM; APPROPRIATION.

(a) \$12,268,000 in fiscal year 2019 is appropriated from the general fund to the commissioner of public safety for the continued development and improvement of the Minnesota Licensing and Registration System and the Driver's License System.

(b) Of this amount: (1) \$5,500,000 is for Phase 2 of the Driver's License System development and implementation, contracting staff and technology costs; and (2) \$6,768,000 is for Minnesota Licensing and Registration System development, technology costs, contracts, and staff.

(c) This is a onetime appropriation and is available until June 30, 2021.

(d) This appropriation is not subject to the procedures under Laws 2018, chapter 101.

EFFECTIVE DATE. This section is effective the day following final enactment.

Sec. 2. DEFICIENCY FUNDING REQUEST FOR DVS; APPROPRIATION.

(a) \$3,472,000 in fiscal year 2019 is appropriated from the general fund to the commissioner of public safety to increase the capacity of Driver and Vehicle Services to meet the customer service levels needs of business partners and the public.

(b) This is a onetime appropriation and is available until June 30, 2021.

EFFECTIVE DATE. This section is effective the day following final enactment.

Sec. 3. PROGRESS REPORT.

Progress made with the appropriations in sections 1 and 2 must be reported directly to the MNLARS Legislative Oversight Committee on a quarterly basis.

EFFECTIVE DATE. This section is effective the day following final enactment.

Sec. 4. **DEPUTY REGISTRAR REIMBURSEMENTS.**

Subdivision 1. **Appropriation.** (a) \$10,000,000 in fiscal year 2019 is appropriated from the general fund to the commissioner of management and budget for reimbursement grants to deputy registrars as provided in this section. The commissioner must make the grants available by June 30, 2019. This is a onetime appropriation.

(b) The commissioner must use existing resources to administer the reimbursements.

Subd. 2. **Eligibility.** A deputy registrar office operated by the state is not eligible to receive funds under this section.

Subd. 3. **Aid distribution.** (a) The reimbursement grant to each deputy registrar, as identified by the Driver and Vehicle Services-designated office location number, is calculated as follows:

(1) ten percent of available funds allocated equally among all deputy registrars;

(2) 45 percent of available funds allocated proportionally based on (i) the number of transactions where a filing fee under Minnesota Statutes, section 168.33, subdivision 7, is retained by each deputy registrar from August 1, 2017, through December 31, 2018, compared to (ii) the total number of transactions where a filing fee is retained by all deputy registrars during that time period; and

(3) 45 percent of available funds allocated proportionally based on (i) the number of transactions where a filing fee is retained by each deputy registrar from July 1, 2014, through June 30, 2017, compared to (ii) the total number of transactions where a filing fee is retained by all deputy registrars during that time period.

(b) For a deputy registrar appointed after July 1, 2014, the commissioner of management and budget must identify whether a corresponding discontinued deputy registrar appointment exists. If a corresponding discontinued deputy registrar is identified, the commissioner must include the transactions of the discontinued deputy registrar in the calculations under paragraph (a) for the deputy registrar appointed after July 1, 2014.

(c) For a deputy registrar appointed after July 1, 2014, to which paragraph (b) does not apply, the commissioner of management and budget must calculate the deputy registrar's proportional share under paragraph (a), clause (3), based on the average number of transactions where a filing fee is retained among the deputy registrars, as calculated excluding any deputy registrars for which this paragraph applies.

(d) In the calculations under paragraph (a), the commissioner of management and budget must exclude transactions for (1) a deputy registrar office operated by the state, and (2) a discontinued deputy registrar for which paragraph (b) does not apply.

Subd. 4. **Documentation.** One or more associations representing deputy registrars must submit documentation to the commissioner of management and budget that provides credible evidence of total increased costs and foregone revenue, calculated across all deputy registrars. The commissioner of management and budget must not release grants under this section until the evidence required under this subdivision is submitted.

Subd. 5. **Conditions.** (a) A deputy registrar who receives a grant under this section must:

(1) remain operating as a deputy registrar for a period of at least 12 months following the date of receipt of the funds; or

(2) pay to the commissioner of management and budget an amount equal to the amount of the grant.

(b) The commissioner must deposit any money received under this subdivision in the general fund.

Subd. 6. **Settlement and release from liability.** (a) The creation or payment of reimbursement grants under this section is not: (1) an admission of liability by the state or its employees for any act or omission arising from the development and deployment of the Minnesota Licensing and Registration System (MNLARS); and (2) admissible in a judicial or administrative proceeding to establish liability or a legal duty.

(b) A deputy registrar who accepts a grant under this section must agree in writing and in a form developed by the commissioner to release the state and its employees from liability arising from the development and deployment of MNLARS.

EFFECTIVE DATE. This section is effective the day following final enactment."

With the recommendation that when so amended the bill be placed on the General Register.

The report was adopted.

Sundin from the Committee on Labor to which was referred:

H. F. No. 905, A bill for an act relating to employment; creating the getting to work grant program; requiring reports; appropriating money; proposing coding for new law in Minnesota Statutes, chapter 116J.

Reported the same back with the recommendation that the bill be re-referred to the Committee on Ways and Means.

The report was adopted.

Freiberg from the Committee on Government Operations to which was referred:

H. F. No. 919, A bill for an act relating to state government; establishing a new state holiday to recognize Hmong people who assisted the United States during the Vietnam War; proposing coding for new law in Minnesota Statutes, chapter 10.

Reported the same back with the following amendments:

Page 1, line 7, delete "Hmong-Lao" and insert "Hmong"

Page 1, line 11, delete everything after "day" and insert "that the overall American-trained Hmong command structure over the Special Guerilla Units in Laos was operational. At least 35,000 Hmong Special Guerilla soldiers lost their lives protecting trapped, lost, or captured American soldiers and pilots in Laos and Vietnam. One-half of the Hmong population in Laos perished as a result of the American Secret War in Laos. Ethnic Hmong men, women, and children in Laos faced persecution and forced re-education in seminar camps after their American support ended. Despite the tremendous cost and sacrifices in the war, the Hmong remain proud to stand by the values of freedom and justice that America symbolizes."

Page 1, delete lines 12 to 14

Page 1, line 15, delete everything before "Those"

With the recommendation that when so amended the bill be re-referred to the Veterans and Military Affairs Finance and Policy Division.

The report was adopted.

Mariani from the Public Safety and Criminal Justice Reform Finance and Policy Division to which was referred:

H. F. No. 1061, A bill for an act relating to public safety; modifying the commissioner of public safety's authority to suspend drivers' licenses in certain situations; providing for retroactive driver's license reinstatement in certain instances; making technical changes; requiring a report; amending Minnesota Statutes 2018, sections 169.92, subdivision 4; 171.16, subdivisions 2, 3; 171.18, subdivision 1; 480.15, by adding a subdivision; proposing coding for new law in Minnesota Statutes, chapter 171.

Reported the same back with the recommendation that the bill be re-referred to the Transportation Finance and Policy Division.

The report was adopted.

Lesch from the Judiciary Finance and Civil Law Division to which was referred:

H. F. No. 1065, A bill for an act relating to legislative enactments; making miscellaneous technical corrections to laws and statutes; correcting erroneous, obsolete, and omitted text and references; removing redundant, conflicting, and superseded provisions; amending Minnesota Statutes 2018, sections 5.001, subdivision 1a; 10A.022, subdivision 3b; 10A.08, subdivision 3; 10A.173; 10A.177; 13.7191, subdivision 19; 13.7905, by adding a subdivision; 15B.36, subdivision 8; 16A.28, subdivision 3; 16D.11, subdivision 3; 16E.03, subdivisions 9, 10; 28A.08, subdivision 3; 28A.151, subdivision 5; 47.58, subdivision 7; 60A.11, subdivision 10; 62D.02, subdivision 12; 79.251, subdivision 2a; 84D.11, subdivision 1; 84D.14; 97A.055, subdivision 2; 97B.621, subdivision 2; 97C.505, subdivision 2; 103B.201; 103B.255, subdivision 3; 103C.321, subdivision 2; 103C.625; 103D.641; 103E.202, subdivision 2; 103H.151, subdivision 4; 122A.31, subdivision 2; 123B.42, subdivision 3; 126C.48, subdivision 8; 127A.49, subdivisions 2, 3; 136A.1276, subdivision 1; 144.441, subdivision 1; 144.55, subdivision 2; 144A.04, subdivision 7; 144A.073, subdivision 1; 145.365, subdivision 4; 146A.09, subdivision 7; 146B.02, subdivision 8; 147.111, subdivision 10; 147E.01, subdivision 3; 148.6402, subdivisions 14, 16; 148.6420, subdivision 1; 148.6443, subdivision 2; 148.6448, subdivision 1; 148.7802, subdivision 3; 148F.11, subdivision 1; 150A.25, subdivision 1; 151.21, subdivision 8; 155A.30, subdivision 12; 168.33, subdivision 8a; 169.81, subdivision 3; 169.86, subdivision 5; 171.05, subdivision 2a; 176.102, subdivision 2; 214.072; 214.073; 245A.065; 245A.07, subdivision 3; 245A.22, subdivision 4; 245D.22, subdivision 2; 252A.01, subdivision 1; 253D.27, subdivision 3; 254B.04, subdivision 1; 254B.05, subdivision 5; 254B.13, subdivision 2a; 256B.0659, subdivision 11; 256B.0755, subdivision 4; 256B.15, subdivision 1k; 256B.49, subdivision 26; 256B.4914, subdivisions 3, 5, 6, 7, 8, 9; 256D.051, subdivision 6b; 256I.01; 256J.95, subdivision 17; 256N.02, subdivision 10; 256N.23, subdivision 11; 256N.26, subdivisions 4, 8, 9; 260.011, subdivision 1; 260B.198, subdivision 1; 260C.139, subdivisions 1, 3; 270B.12, subdivision 7; 289A.18, subdivision 2a; 290.06, subdivision 2h; 290.0674, subdivision 1; 290.0677, subdivision 1; 290.0684, subdivision 1; 290A.03, subdivisions 8, 12; 290A.19; 297A.68, subdivision 9; 297F.08, subdivision 8; 298.296, subdivision 2; 299L.09, subdivision 1; 309.515, subdivision 1; 319B.02, subdivision 3; 321.1116, subdivision 2; 326B.986, subdivision 8; 349.12, subdivision 25; 352.22, subdivision 8; 352D.02, subdivision 3; 352D.04, subdivision 2; 353.37; 353.6511, subdivision 7; 353.6512, subdivision 7; 353G.01, subdivision 8b; 354.46, subdivision 6; 354.50, subdivision 4; 354A.35, subdivision 2; 354B.20, subdivision 10; 356.65, subdivision 2; 360.0752, subdivision 5;

383D.41, subdivision 11; 473.4052, subdivision 2; 473.517, subdivision 3; 475.55, subdivision 7; 501C.0105; 576.25, subdivision 5; 604A.11, subdivision 1; 626.556, subdivisions 2, 3e; 626.557, subdivision 4; Laws 2018, chapter 214, article 1, sections 16, subdivision 7; 17, subdivision 7; 22, subdivision 4; 26, subdivision 1; article 3, sections 7, subdivision 1; 11; 13; 14; 15; repealing Minnesota Statutes 2018, sections 13.411, subdivision 2; 116J.8737, subdivision 10; 127A.05, subdivision 6; 148.6402, subdivisions 11, 12, 17, 24, 26; 148E.0555; 148E.0556; 148E.0557; 161.36, subdivision 7; 174.37; 609B.105; Laws 2018, chapter 211, article 11, section 16; Laws 2018, chapter 214, article 3, sections 7, subdivision 2; 8, subdivision 2; 9, subdivision 2; 10, subdivision 2; Minnesota Rules, part 2782.0100.

Reported the same back with the recommendation that the bill be placed on the General Register.

The report was adopted.

SECOND READING OF HOUSE BILLS

H. F. Nos. 85, 232, 861 and 1065 were read for the second time.

INTRODUCTION AND FIRST READING OF HOUSE BILLS

The following House Files were introduced:

Olson, Murphy and Schultz introduced:

H. F. No. 1596, A bill for an act relating to capital investment; appropriating money for predesign and design of the Main Building at the Lake Superior Zoo; authorizing the sale and issuance of state bonds.

The bill was read for the first time and referred to the Committee on Ways and Means.

West introduced:

H. F. No. 1597, A bill for an act relating to capital investment; appropriating money for an underpass on marked Trunk Highway 65; authorizing the sale and issuance of trunk highway bonds.

The bill was read for the first time and referred to the Committee on Ways and Means.

Hansen introduced:

H. F. No. 1598, A bill for an act relating to capital investment; appropriating money for wastewater infrastructure improvements in West St. Paul; authorizing the sale and issuance of state bonds.

The bill was read for the first time and referred to the Committee on Ways and Means.

Sandstede introduced:

H. F. No. 1599, A bill for an act relating to taxation; local government aid; providing an aid increase for the city of Floodwood; increasing local government aid appropriation; amending Minnesota Statutes 2018, sections 477A.013, subdivision 13; 477A.03, subdivision 2a.

The bill was read for the first time and referred to the Committee on Taxes.

Marquart and Backer introduced:

H. F. No. 1600, A bill for an act relating to capital investment; appropriating money for flood hazard mitigation in the Buffalo-Red River Watershed District; authorizing the sale and issuance of state bonds.

The bill was read for the first time and referred to the Committee on Ways and Means.

Mariani introduced:

H. F. No. 1601, A bill for an act relating to state government; appropriating money to construct the John Francis Wheaton Memorial.

The bill was read for the first time and referred to the Committee on Ways and Means.

Moran introduced:

H. F. No. 1602, A bill for an act relating to child welfare; appropriating money for parent support grants.

The bill was read for the first time and referred to the Committee on Ways and Means.

Dehn introduced:

H. F. No. 1603, A bill for an act relating to elections; authorizing mail balloting in any town or any city with fewer than 400 registered voters; amending Minnesota Statutes 2018, section 204B.45, subdivision 1.

The bill was read for the first time and referred to the Committee on Government Operations.

Edelson introduced:

H. F. No. 1604, A bill for an act relating to public safety; appropriating money for a grant to an organization providing legal representation for children.

The bill was read for the first time and referred to the Committee on Ways and Means.

Klevorn and Halverson introduced:

H. F. No. 1605, A bill for an act relating to redistricting; requiring the appointment of a commission to recommend the boundaries of legislative and congressional districts; establishing districting principles for legislative and congressional plans; assigning duties to the Legislative Coordinating Commission; assigning duties to the secretary of state; proposing coding for new law in Minnesota Statutes, chapters 2; 204B.

The bill was read for the first time and referred to the Committee on Government Operations.

Hornstein introduced:

H. F. No. 1606, A bill for an act relating to capital investment; appropriating money for bus rapid transit lines; authorizing the sale and issuance of state bonds.

The bill was read for the first time and referred to the Committee on Ways and Means.

Clafin, Lee and Lillie introduced:

H. F. No. 1607, A bill for an act relating to state government; appropriating money for a velodrome.

The bill was read for the first time and referred to the Committee on Ways and Means.

Brand, Considine, Mahoney and Wolgamott introduced:

H. F. No. 1608, A bill for an act relating to agriculture; appropriating money for grants to the Center for Rural Policy and Development.

The bill was read for the first time and referred to the Committee on Ways and Means.

Brand, Poston, Lippert, Wolgamott, Fischer, Poppe, Huot, Ecklund, Lien, Vang, Hansen and Xiong, T., introduced:

H. F. No. 1609, A bill for an act relating to natural resources; appropriating money for statewide action plan for soil health.

The bill was read for the first time and referred to the Committee on Ways and Means.

Pryor, Hausman, Pinto, Noor, Lillie and Morrison introduced:

H. F. No. 1610, A bill for an act relating to capital improvements; appropriating money to replace the Institute of Child Development building on the Twin Cities campus of the University of Minnesota; authorizing the sale and issuance of state bonds.

The bill was read for the first time and referred to the Committee on Ways and Means.

Mahoney and Fischer introduced:

H. F. No. 1611, A bill for an act relating to arts and cultural heritage; appropriating money for Chinese garden.

The bill was read for the first time and referred to the Committee on Ways and Means.

Mahoney and Fischer introduced:

H. F. No. 1612, A bill for an act relating to arts and culture; appropriating money for the Chinese garden in Phalen Park.

The bill was read for the first time and referred to the Committee on Ways and Means.

Mahoney and Fischer introduced:

H. F. No. 1613, A bill for an act relating to arts and culture; appropriating money for the Chinese garden in Phalen Park.

The bill was read for the first time and referred to the Committee on Ways and Means.

Theis introduced:

H. F. No. 1614, A bill for an act relating to education; providing for school start times; amending Minnesota Statutes 2018, section 120A.41.

The bill was read for the first time and referred to the Committee on Education Policy.

Wolgamott, Considine and Theis introduced:

H. F. No. 1615, A bill for an act relating to corrections; appropriating money for additional support and clinical staff in correctional facilities.

The bill was read for the first time and referred to the Committee on Ways and Means.

Lippert, Brand, Poppe, Hamilton and Schomacker introduced:

H. F. No. 1616, A bill for an act relating to agriculture; appropriating money for agriculture related business assistance.

The bill was read for the first time and referred to the Committee on Ways and Means.

Urdahl, Murphy, Hausman, Heintzeman, Gruenhagen, Fabian, Schomacker, Nornes, Bennett, Gunther, O'Driscoll, Poston, Daniels, Petersburg, Grossell, Layman, Haley, Demuth, Dettmer, Franson, Backer, Torkelson, Jurgens, Baker, Swedzinski, Considine, Sundin, Poppe, Persell, Lien, Marquart, Hansen, Lillie, Ecklund and Carlson, L., introduced:

H. F. No. 1617, A bill for an act relating to capital investment; appropriating money for clean water; authorizing the sale and issuance of state bonds.

The bill was read for the first time and referred to the Committee on Ways and Means.

Heinrich and Stephenson introduced:

H. F. No. 1618, A bill for an act relating to capital investment; appropriating money for the Rum River dam; authorizing the sale and issuance of state bonds.

The bill was read for the first time and referred to the Committee on Ways and Means.

Loeffler, Zerwas, Elkins, Moran, Mann, Morrison, Klevorn, Olson, Halverson, Masin, Cantrell, Edelson, Considine and Pryor introduced:

H. F. No. 1619, A bill for an act relating to human services; appropriating money for the Council on Disability.

The bill was read for the first time and referred to the Committee on Ways and Means.

Gomez; Loeffler; Lien; Xiong, T.; Richardson; Youakim; Bernardy; Becker-Finn; Xiong, J., and Davnie introduced:

H. F. No. 1620, A bill for an act relating to taxation; individual income; modifying the working family credit calculation; amending Minnesota Statutes 2018, section 290.0671, subdivisions 1, 7.

The bill was read for the first time and referred to the Committee on Taxes.

Layman introduced:

H. F. No. 1621, A bill for an act relating to capital investment; appropriating money for the IRA Civic Center in Grand Rapids; authorizing the sale and issuance of state bonds.

The bill was read for the first time and referred to the Committee on Ways and Means.

Christensen, Poston, Dehn, O'Neill, Moller and Considine introduced:

H. F. No. 1622, A bill for an act relating to corrections; appropriating money to increase correctional officer minimum starting salaries.

The bill was read for the first time and referred to the Committee on Ways and Means.

Hornstein introduced:

H. F. No. 1623, A bill for an act relating to transportation; making miscellaneous policy changes, including but not limited to provisions governing bicycles, school bus warning lights, driver's license suspension, airport zoning, legislative route removals, and memorial highways and bridges; amending Minnesota Statutes 2018, sections 3.972, subdivision 4; 13.461, by adding a subdivision; 13.72, subdivision 10; 160.02, subdivision 1a; 161.115, subdivision 111; 161.14, by adding subdivisions; 161.32, subdivision 2; 168A.29, subdivision 1; 169.011, subdivisions 5, 9; 169.18, subdivisions 3, 7; 169.20, by adding a subdivision; 169.222, subdivisions 1, 4; 169.442, subdivision 5, by adding a subdivision; 169.448, subdivision 1; 169.4503, subdivisions 5, 13, by adding a subdivision; 169.55, subdivision 1; 169.57, subdivision 3; 169.64, subdivisions 3, 8, by adding a subdivision; 169.81, by adding a subdivision; 169.8261, subdivision 2; 169.829, subdivision 4; 169.92, subdivision 4; 171.041; 171.06, subdivision 2; 171.16, subdivisions 2, 3; 171.18, subdivision 1; 174.12, subdivision 8; 299A.705; 360.013, by adding a subdivision; 360.017, subdivision 1; 360.021, subdivision 1; 360.024; 360.062; 360.063, subdivisions 1, 3; 360.064, subdivision 1; 360.065, subdivision 1; 360.066, subdivision 1; 360.067, by adding a subdivision; 360.071, subdivision 2; 360.305, subdivision 6; 394.22, by adding a subdivision; 394.23; 394.231; 394.25, subdivision 3; 462.352, by adding a subdivision; 462.355, subdivision 1; 462.357, subdivision 9, by adding a subdivision; 473.13, by adding a subdivision; 473.386, by adding a subdivision; 574.26, subdivision 1a; Laws 2014, chapter 312, article 11, section 38, subdivisions 5, 6; proposing coding for new law in Minnesota Statutes, chapters 299A; 360; repealing Minnesota Statutes 2018, sections 168.013, subdivision 21; 360.063, subdivision 4; 360.065, subdivision 2; 360.066, subdivisions 1a, 1b.

The bill was read for the first time and referred to the Transportation Finance and Policy Division.

Fischer, Poppe, Ecklund, Sundin and Persell introduced:

H. F. No. 1624, A bill for an act relating to natural resources; appropriating money for soil and water conservation districts.

The bill was read for the first time and referred to the Committee on Ways and Means.

Dehn, Wagenius, Noor and Lee introduced:

H. F. No. 1625, A bill for an act relating to capital investment; appropriating money for expansion of the Central City Storm Tunnel in the city of Minneapolis; authorizing the sale and issuance of state bonds.

The bill was read for the first time and referred to the Committee on Ways and Means.

Wagenius introduced:

H. F. No. 1626, A bill for an act relating to natural resources; appropriating money for nonmotorized state trail rehabilitation and maintenance.

The bill was read for the first time and referred to the Committee on Ways and Means.

Dehn, Albright and Hausman introduced:

H. F. No. 1627, A bill for an act relating to capital investment; appropriating money for the Minnesota Shubert Center for Dance and Music; canceling the 2014 appropriation; authorizing the sale and issuance of state bonds; repealing Laws 2014, chapter 294, article 1, section 21, subdivision 13, as amended.

The bill was read for the first time and referred to the Committee on Ways and Means.

Sundin, Lislegard, Ecklund and Halverson introduced:

H. F. No. 1628, A bill for an act relating to elections; modifying certain special election timelines; amending Minnesota Statutes 2018, sections 204D.19, subdivision 2; 204D.22, subdivision 3; 204D.23, subdivision 2.

The bill was read for the first time and referred to the Committee on Government Operations.

Richardson, Hansen and Lee introduced:

H. F. No. 1629, A bill for an act relating to education; establishing requirements for school resource officers; proposing coding for new law in Minnesota Statutes, chapter 121A.

The bill was read for the first time and referred to the Committee on Education Policy.

Tabke, Poston, Poppe and Ecklund introduced:

H. F. No. 1630, A bill for an act relating to agriculture; establishing a pilot program to provide grants to prevent wolf-livestock conflict; appropriating money.

The bill was read for the first time and referred to the Committee on Ways and Means.

Brand, Ecklund, Poston, Vang and Marquart introduced:

H. F. No. 1631, A bill for an act relating to taxation; sales and use; modifying the definition for the exemption of farm machinery to include grain bins; providing an exemption for certain construction materials for grain bins; amending Minnesota Statutes 2018, sections 297A.61, subdivision 12; 297A.71, by adding a subdivision.

The bill was read for the first time and referred to the Committee on Taxes.

Brand and Considine introduced:

H. F. No. 1632, A bill for an act relating to human services; establishing a functional family therapy pilot project; appropriating money.

The bill was read for the first time and referred to the Committee on Health and Human Services Policy.

Pryor, Youakim, Elkins, Freiberg and Acomb introduced:

H. F. No. 1633, A bill for an act relating to education finance; increasing alternative teacher compensation aid; eliminating the program waiting list; eliminating the program aid proration; appropriating money; amending Minnesota Statutes 2018, section 122A.415, subdivisions 4, 5.

The bill was read for the first time and referred to the Committee on Ways and Means.

Theis introduced:

H. F. No. 1634, A bill for an act relating to building codes; modifying window cleaning safety anchor requirements; amending Minnesota Statutes 2018, section 326B.106, subdivision 4.

The bill was read for the first time and referred to the Committee on Commerce.

Theis introduced:

H. F. No. 1635, A bill for an act relating to health; establishing graduate registered physician licensure; proposing coding for new law in Minnesota Statutes, chapter 147.

The bill was read for the first time and referred to the Committee on Health and Human Services Policy.

Theis introduced:

H. F. No. 1636, A bill for an act relating to health; requiring a report; appropriating money for identifying patients at risk for colon cancer and providing screening.

The bill was read for the first time and referred to the Committee on Health and Human Services Policy.

Sandstede, Ecklund and Nelson introduced:

H. F. No. 1637, A bill for an act relating to transportation finance; modifying a conveyance of property to city of Floodwood; amending Laws 1994, chapter 643, section 15, subdivision 8.

The bill was read for the first time and referred to the Committee on Ways and Means.

Gomez; Mariani; Xiong, J.; Dehn; Lee; Hassan and Noor introduced:

H. F. No. 1638, A bill for an act relating to public safety; appropriating money for MAD DADS to provide services and programs to underserved communities.

The bill was read for the first time and referred to the Committee on Ways and Means.

Jurgens, Albright and Lucero introduced:

H. F. No. 1639, A bill for an act relating to education; modifying student performance data collection; amending Minnesota Statutes 2018, sections 120B.31, subdivision 4; 120B.35, subdivision 3.

The bill was read for the first time and referred to the Committee on Education Policy.

Albright, Daudt, Sandstede, Hertaus, Jurgens, Dettmer and Neu introduced:

H. F. No. 1640, A bill for an act relating to education; providing for display of the national motto; proposing coding for new law in Minnesota Statutes, chapter 121A.

The bill was read for the first time and referred to the Committee on Education Policy.

Albright and Zerwas introduced:

H. F. No. 1641, A bill for an act relating to health care; permitting an individual eligible for MinnesotaCare to elect to purchase a qualified health plan; amending Minnesota Statutes 2018, section 256L.04, subdivision 1c.

The bill was read for the first time and referred to the Committee on Health and Human Services Policy.

Youakim; Davids; Carlson, L.; Koznick and Becker-Finn introduced:

H. F. No. 1642, A bill for an act relating to taxation; income; modifying the historic structure rehabilitation credit; clarifying the allowance and assignment of the credit; making the credit permanent; amending Minnesota Statutes 2018, section 290.0681, subdivisions 2, 4; repealing Minnesota Statutes 2018, section 290.0681, subdivision 10.

The bill was read for the first time and referred to the Committee on Taxes.

Bahr, Huot, Youakim and Kunesh-Podein introduced:

H. F. No. 1643, A bill for an act relating to education; permitting youth organizations informational access to students; proposing coding for new law in Minnesota Statutes, chapter 123B.

The bill was read for the first time and referred to the Committee on Education Policy.

Long; Carlson, L.; Nelson; McDonald; Lee; Bierman; Freiberg; Stephenson; Pinto; Wolgamott; Layman; Zerwas; Noor; Boe; Carlson, A.; O'Neill; Urdahl and Heinrich introduced:

H. F. No. 1644, A bill for an act relating to state government; requiring multiunit residential facilities to provide access to employees of the United States Census; establishing a Census 2020 Mobilization Partnership program; appropriating money to support certain outreach initiatives to encourage participation in the 2020 federal census.

The bill was read for the first time and referred to the Committee on Government Operations.

West, Daniels, Urdahl and Jurgens introduced:

H. F. No. 1645, A bill for an act relating to veterans; establishing a scholarship program for veterans enrolled in teacher preparation programs; appropriating money; proposing coding for new law in Minnesota Statutes, chapter 136A.

The bill was read for the first time and referred to the Committee on Ways and Means.

Zerwas, Theis and Franson introduced:

H. F. No. 1646, A bill for an act relating to health; allowing state contractor licensee to perform radon mitigation work; amending Minnesota Statutes 2018, sections 144.4961, by adding a subdivision; 326B.805, by adding a subdivision.

The bill was read for the first time and referred to the Committee on Commerce.

McDonald, Albright, Nash, Lucero, Davids and Pierson introduced:

H. F. No. 1647, A bill for an act relating to liquor; authorizing persons under 21 serving in the armed forces to consume, purchase, or possess alcohol; proposing coding for new law in Minnesota Statutes, chapter 340A.

The bill was read for the first time and referred to the Committee on Commerce.

Koznick, Scott, West, Petersburg and Jurgens introduced:

H. F. No. 1648, A bill for an act relating to motor vehicles; amending bulk vehicle record requirements and procedures; requiring annual reports by commissioner of public safety and legislative auditor; requiring notice of disclosure of private data; amending Minnesota Statutes 2018, sections 168.327, subdivisions 5, 6, by adding a subdivision; 168.346, subdivision 3.

The bill was read for the first time and referred to the Committee on Ways and Means.

Ecklund, Sundin, Petersburg and Torkelson introduced:

H. F. No. 1649, A bill for an act relating to transportation; providing for third-party testing for school bus companies; amending Minnesota Statutes 2018, section 171.01, by adding subdivisions; proposing coding for new law in Minnesota Statutes, chapter 171.

The bill was read for the first time and referred to the Transportation Finance and Policy Division.

Poppe, Davids, Gunther, Petersburg, Bennett and Ecklund introduced:

H. F. No. 1650, A bill for an act relating to economic development; modifying local match requirements for redevelopment grants; appropriating money for the redevelopment program; amending Minnesota Statutes 2018, section 116J.575, subdivision 3.

The bill was read for the first time and referred to the Committee on Ways and Means.

Gruenhagen introduced:

H. F. No. 1651, A bill for an act relating to health care; creating an unconscious person's bill of rights; amending Minnesota Statutes 2018, section 144.651, subdivision 2, by adding a subdivision.

The bill was read for the first time and referred to the Committee on Health and Human Services Policy.

Youakim introduced:

H. F. No. 1652, A bill for an act relating to metropolitan government; providing for additional financing of metropolitan area transit and paratransit capital expenditures; authorizing the issuance of certain obligations; amending Minnesota Statutes 2018, section 473.39, by adding a subdivision.

The bill was read for the first time and referred to the Committee on Ways and Means.

Hassan, Moran, Noor, Liebling, Edelson, Davnie, Kunesh-Podein, Morrison, Acomb and Gomez introduced:

H. F. No. 1653, A bill for an act relating to human services; modifying Northstar Care for Children benefits for children under the age of six; amending Minnesota Statutes 2018, sections 256N.26, subdivision 5; 256N.27, subdivisions 2, 4.

The bill was read for the first time and referred to the Committee on Ways and Means.

Bernardy introduced:

H. F. No. 1654, A bill for an act relating to transportation; appropriating money for certain safety improvements and engineering evaluations.

The bill was read for the first time and referred to the Committee on Ways and Means.

Gomez, Becker-Finn, Wagenius and Lee introduced:

H. F. No. 1655, A bill for an act relating to natural resources; appropriating money to enhance efforts to ensure that staff of the Department of Natural Resources includes members of communities traditionally underrepresented on the agency's staff.

The bill was read for the first time and referred to the Committee on Ways and Means.

Persell and Lueck introduced:

H. F. No. 1656, A bill for an act relating to natural resources; modifying provisions for renewable energy in state buildings; modifying provisions for certain grants for outdoor recreation; modifying game and fish law; providing for removal of beavers and beaver dams causing damage; amending Minnesota Statutes 2018, sections 16B.32, subdivision 1a; 16B.323, subdivision 2; 84.026, by adding a subdivision; 84.794, subdivision 2; 84.83, subdivision 3; 85.44; 97A.015, subdivisions 25, 43; 97A.126; 97A.475, subdivision 4; 97B.655; 97B.665, by adding a subdivision; 97B.667, subdivisions 2, 3, 4, by adding a subdivision.

The bill was read for the first time and referred to the Committee on Environment and Natural Resources Policy.

Dettmer introduced:

H. F. No. 1657, A bill for an act relating to local government; authorizing the city of Scandia to create a subordinate service district in order to provide broadband service.

The bill was read for the first time and referred to the Committee on Government Operations.

Richardson, Bennett, Kresha and Kunesh-Podein introduced:

H. F. No. 1658, A bill for an act relating to human services; expanding liability insurance coverage for licensed foster home providers; amending Minnesota Statutes 2018, section 245.814, subdivisions 2, 3.

The bill was read for the first time and referred to the Committee on Health and Human Services Policy.

Schultz, Miller, Pinto, Halverson, Fischer, Olson and Mariani introduced:

H. F. No. 1659, A bill for an act relating to health; appropriating money for shelter, services, and other activities for sexually exploited youth and youth at risk of sexual exploitation.

The bill was read for the first time and referred to the Committee on Ways and Means.

Vang, Poppe, Her, Sundin, Ecklund, Jurgens, Zerwas and Edelson introduced:

H. F. No. 1660, A bill for an act relating to agriculture; modifying definitions of industrial hemp and marijuana; modifying provision related to possession of industrial hemp; requiring the commissioner of agriculture to apply for primary regulatory authority over the production of industrial hemp in this state; amending Minnesota Statutes 2018, sections 18K.02, subdivision 3; 18K.03; 152.01, subdivision 9.

The bill was read for the first time and referred to the Agriculture and Food Finance and Policy Division.

Vang, Her, Sundin, Ecklund, Jurgens, Zerwas and Edelson introduced:

H. F. No. 1661, A bill for an act relating to agriculture; allowing Minnesota hemp growers to sell Minnesota grown hemp to manufacturers in the medical cannabis program; amending Minnesota Statutes 2018, sections 18K.03; 152.22, by adding a subdivision; 152.25, subdivision 4; 152.29, subdivisions 1, 2, 3a; 152.31; 152.36, subdivision 2.

The bill was read for the first time and referred to the Agriculture and Food Finance and Policy Division.

Schultz; Poston; Bierman; Zerwas; Davnie; Noor; Gomez; Bernardy; Persell; Wagenius; Xiong, T.; Winkler; Carlson, A.; Sandell; Dehn and Wazlawik introduced:

H. F. No. 1662, A bill for an act relating to higher education; establishing a new measurement of economic welfare; requiring the inclusion of the economic measure in the state budget forecast; requiring a report; appropriating money; amending Minnesota Statutes 2018, section 16A.103, subdivision 1; proposing coding for new law in Minnesota Statutes, chapter 137.

The bill was read for the first time and referred to the Committee on Ways and Means.

Lislegard and Davids introduced:

H. F. No. 1663, A bill for an act relating to taxation; establishing a private letter ruling program; limiting assessment authority of the commissioner of revenue; providing expanded authority to abate penalties and taxes; modifying penalties; appropriating money; amending Minnesota Statutes 2018, sections 270C.31, by adding a subdivision; 270C.33, by adding subdivisions; 270C.34, subdivision 1; 270C.35, subdivision 4; 289A.40, subdivision 1; 289A.60, subdivision 1; proposing coding for new law in Minnesota Statutes, chapter 270C.

The bill was read for the first time and referred to the Committee on Taxes.

Gomez; Vang; Moran; Richardson; Kunesh-Podein; Hassan; Xiong, J.; Morrison; Becker-Finn and Mann introduced:

H. F. No. 1664, A bill for an act relating to health; appropriating money to the commissioner of health for a grant to a nonprofit organization to provide doula support, childbirth, and postpartum services to low-income families of color.

The bill was read for the first time and referred to the Committee on Ways and Means.

Demuth and Nornes introduced:

H. F. No. 1665, A bill for an act relating to human services; creating the Office of Ombudsperson for Child Care Providers; providing appointments; requiring reports; appropriating money; proposing coding for new law in Minnesota Statutes, chapter 119B.

The bill was read for the first time and referred to the Committee on Ways and Means.

Scott, Mahoney, Fabian, Moran, Jurgens, Baker, Petersburg and Hertaus introduced:

H. F. No. 1666, A bill for an act relating to child care; clarifying child care authorizations for parenting time; clarifying child care reimbursement for parenting time; clarifying child care reporting requirements; modifying parenting time presumptions; requiring findings for parenting time schedules; amending Minnesota Statutes 2018, sections 119B.095, subdivision 2, by adding a subdivision; 256P.07, subdivision 6; 518.175, subdivision 1.

The bill was read for the first time and referred to the Early Childhood Finance and Policy Division.

Fabian introduced:

H. F. No. 1667, A bill for an act relating to natural resources; providing for training and licensing of wildland firefighters; amending Minnesota Statutes 2018, section 88.10, by adding a subdivision.

The bill was read for the first time and referred to the Committee on Environment and Natural Resources Policy.

Pryor introduced:

H. F. No. 1668, A bill for an act relating to health care; establishing the Prescription Drug Affordability Act; creating a prescription drug affordability commission and prescription drug affordability requirements; requiring a report; appropriating money; proposing coding for new law in Minnesota Statutes, chapter 62J.

The bill was read for the first time and referred to the Committee on Commerce.

Her; Kunesh-Podein; Noor; Long; Lee; Xiong, J.; Becker-Finn and Mahoney introduced:

H. F. No. 1669, A bill for an act relating to economic development; providing a phased-in minimum wage to help low-income workers meet basic needs; amending Minnesota Statutes 2018, section 177.24, subdivision 1.

The bill was read for the first time and referred to the Committee on Labor.

Fabian introduced:

H. F. No. 1670, A bill for an act relating to natural resources; allowing all-terrain vehicles with snorkel devices; amending Minnesota Statutes 2018, sections 84.775, subdivision 1; 84.928, subdivision 2.

The bill was read for the first time and referred to the Committee on Environment and Natural Resources Policy.

Youakim; Loeffler; Xiong, J.; Pryor; Bahner; Hassan; Lillie; Koegel; Sandell; Huot; Xiong, T.; Masin; Persell; Vang; Davnie; Hausman; Richardson; Fischer; Murphy; Wazlawik and Tabke introduced:

H. F. No. 1671, A bill for an act relating to energy; modifying the definition of biomass as an eligible energy technology; increasing the proportion of energy that electricity-generating utilities must supply from renewable sources and setting target dates by which those goals must be achieved; amending Minnesota Statutes 2018, section 216B.1691, subdivisions 1, 2a, 2b, 9, by adding a subdivision.

The bill was read for the first time and referred to the Energy and Climate Finance and Policy Division.

Grossell, Layman, Heintzeman and Daniels introduced:

H. F. No. 1672, A bill for an act relating to natural resources; establishing bicycle pass for state trails; establishing fee; appropriating money; proposing coding for new law in Minnesota Statutes, chapter 85.

The bill was read for the first time and referred to the Committee on Environment and Natural Resources Policy.

Fabian, Lueck, Gunther, Kiel, Urdahl, Poston, Daniels, Heintzeman, Nornes, Gruenhagen, Swedzinski and Theis introduced:

H. F. No. 1673, A bill for an act relating to environment; prohibiting Pollution Control Agency and Department of Natural Resources from enforcing unadopted rules; amending Minnesota Statutes 2018, sections 84.027, by adding a subdivision; 116.07, by adding a subdivision.

The bill was read for the first time and referred to the Committee on Environment and Natural Resources Policy.

Hornstein introduced:

H. F. No. 1674, A bill for an act relating to mass transit; requiring a facilitated conversation between the Metropolitan Council and the Calhoun Isles Condominium Association; requiring the Metropolitan Council to conduct a vibration susceptibility study; requiring the Metropolitan Council to reimburse the Calhoun Isles Condominium Association for certain costs.

The bill was read for the first time and referred to the Committee on Government Operations.

Tabke introduced:

H. F. No. 1675, A bill for an act relating to public safety; requiring driver education and driver's manual to cover distracted driving; authorizing rulemaking; amending Minnesota Statutes 2018, sections 171.0701, subdivision 1; 171.0705, by adding a subdivision.

The bill was read for the first time and referred to the Transportation Finance and Policy Division.

Richardson, Lillie, Hansen, Sandell and Huot introduced:

H. F. No. 1676, A bill for an act relating to education; increasing the number of funded participants in the voluntary prekindergarten program for fiscal year 2020 and later; appropriating money; amending Minnesota Statutes 2018, section 124D.151, subdivision 6.

The bill was read for the first time and referred to the Committee on Ways and Means.

Baker, Ecklund, Fabian, Sundin and Lueck introduced:

H. F. No. 1677, A bill for an act relating to energy; establishing a process to compensate businesses for loss of business opportunity resulting from sale and closure of a biomass energy plant.

The bill was read for the first time and referred to the Committee on Ways and Means.

Edelson and Dehn introduced:

H. F. No. 1678, A bill for an act relating to juvenile justice; addressing numerous issues relating to juveniles including risk assessments, alternatives to arrest, and use of restraints; amending Minnesota Statutes 2018, section 260B.176, by adding a subdivision; proposing coding for new law in Minnesota Statutes, chapter 260B.

The bill was read for the first time and referred to the Public Safety and Criminal Justice Reform Finance and Policy Division.

Noor introduced:

H. F. No. 1679, A bill for an act relating to public safety; prohibiting certain juvenile hearings and records from the public; raising juvenile court delinquency jurisdiction to age 13; modifying certain human services disqualifications; amending Minnesota Statutes 2018, sections 245C.14, subdivision 1; 245C.24, subdivision 2; 260B.163, subdivision 1; 260C.007, subdivision 6.

The bill was read for the first time and referred to the Public Safety and Criminal Justice Reform Finance and Policy Division.

Demuth, Heintzeman, West, Albright and Franson introduced:

H. F. No. 1680, A bill for an act relating to human services; clarifying child care assistance program record-keeping requirements; amending Minnesota Statutes 2018, section 119B.125, subdivision 6.

The bill was read for the first time and referred to the Early Childhood Finance and Policy Division.

Huot introduced:

H. F. No. 1681, A bill for an act relating to coroners and medical examiners; requiring the annual review of the coroner and medical examiner by the county board; requiring a report; amending Minnesota Statutes 2018, sections 390.005, subdivision 6; 390.31, by adding a subdivision; proposing coding for new law in Minnesota Statutes, chapter 390.

The bill was read for the first time and referred to the Committee on Government Operations.

Edelson introduced:

H. F. No. 1682, A bill for an act relating to transportation; requiring commissioner of public safety to adopt rules for driver's education programs and the driver's manual on safe interactions with law enforcement officials and safely responding to emergencies; establishing the Driver's Education Content Task Force; appropriating money; requiring rulemaking; requiring a report; amending Minnesota Statutes 2018, sections 171.0701, subdivision 1; 171.0705, by adding a subdivision.

The bill was read for the first time and referred to the Committee on Ways and Means.

Long, Hornstein, Garofalo, Lippert and Mahoney introduced:

H. F. No. 1683, A bill for an act relating to utilities; providing access rights to energy usage data maintained by utilities; amending Minnesota Statutes 2018, section 13.685; proposing coding for new law in Minnesota Statutes, chapter 216B.

The bill was read for the first time and referred to the Energy and Climate Finance and Policy Division.

Wazlawik and Pinto introduced:

H. F. No. 1684, A bill for an act relating to human services; directing commissioner of human services to streamline child care licensing and background study record requirements.

The bill was read for the first time and referred to the Early Childhood Finance and Policy Division.

Wazlawik and Pinto introduced:

H. F. No. 1685, A bill for an act relating to human services; increasing time a child care substitute can provide care; amending Minnesota Statutes 2018, section 245A.50, subdivisions 2, 7, 9.

The bill was read for the first time and referred to the Early Childhood Finance and Policy Division.

Scott, Lesch, Schultz, Lucero, O'Neill, Erickson, Urdahl, Bahr, Vogel, Backer, Robbins, Cantrell and Liebling introduced:

H. F. No. 1686, A bill for an act relating to health care; establishing a statutory form to provide consent for the disclosure of health care records; amending Minnesota Statutes 2018, section 144.293, subdivision 2; proposing coding for new law in Minnesota Statutes, chapter 144.

The bill was read for the first time and referred to the Committee on Health and Human Services Policy.

Pryor, Youakim, Elkins, Freiberg and Acomb introduced:

H. F. No. 1687, A bill for an act relating to education finance; authorizing a fund transfer for independent school district No. 270, Hopkins.

The bill was read for the first time and referred to the Committee on Ways and Means.

Theis introduced:

H. F. No. 1688, A bill for an act relating to community development; appropriating money for the central Minnesota opportunity grant program.

The bill was read for the first time and referred to the Committee on Ways and Means.

Brand, Marquart, Davids, Swedzinski and Bennett introduced:

H. F. No. 1689, A bill for an act relating to taxation; exempting certain improvements made by a qualified business; amending Minnesota Statutes 2018, sections 116J.8738, subdivisions 2, 4; 275.025, subdivisions 2, 4.

The bill was read for the first time and referred to the Committee on Taxes.

Brand introduced:

H. F. No. 1690, A bill for an act relating to health; changing the membership of the Rural Health Advisory Committee; amending Minnesota Statutes 2018, section 144.1481, subdivision 1.

The bill was read for the first time and referred to the Committee on Health and Human Services Policy.

Gomez, Zerwas, Hassan and Moran introduced:

H. F. No. 1691, A bill for an act relating to human services; appropriating money for a grant to Family Enhancement Center.

The bill was read for the first time and referred to the Committee on Ways and Means.

Hornstein introduced:

H. F. No. 1692, A bill for an act relating to transportation; expanding uses of appropriations for corridors of commerce program; amending Minnesota Statutes 2018, section 161.088, subdivision 2; Laws 2018, chapter 214, article 1, section 16, subdivision 11.

The bill was read for the first time and referred to the Committee on Ways and Means.

Noor, Lesch, Zerwas, Davnie and McDonald introduced:

H. F. No. 1693, A bill for an act relating to economic development; appropriating money for Goodwill Easter Seals.

The bill was read for the first time and referred to the Committee on Ways and Means.

Acomb, Mariani, Koznick, Noor, Davnie and Zerwas introduced:

H. F. No. 1694, A bill for an act relating to education; teachers; requiring a report; appropriating money.

The bill was read for the first time and referred to the Committee on Ways and Means.

Vang; Kunesh-Podein; Xiong, J.; Becker-Finn; Lee and Cantrell introduced:

H. F. No. 1695, A bill for an act relating to education finance; reinstating funding for the college-level examination program; appropriating money; amending Minnesota Statutes 2018, section 120B.131.

The bill was read for the first time and referred to the Committee on Ways and Means.

Bahner and Zerwas introduced:

H. F. No. 1696, A bill for an act relating to elections; modifying definition of residential facility for purposes of election day registration procedures; amending Minnesota Statutes 2018, section 201.061, subdivision 3.

The bill was read for the first time and referred to the Committee on Government Operations.

Koegel and Stephenson introduced:

H. F. No. 1697, A bill for an act relating to transportation; capital improvements; appropriating money for East River Road interchange improvements at marked Trunk Highway 610; authorizing the sale and issuance of state bonds.

The bill was read for the first time and referred to the Committee on Ways and Means.

Xiong, J.; Ecklund and Dettmer introduced:

H. F. No. 1698, A bill for an act relating to state government; appropriating money for Veterans' Voices radio programming.

The bill was read for the first time and referred to the Committee on Ways and Means.

Sandstede introduced:

H. F. No. 1699, A bill for an act relating to natural resources; establishing management requirements for Hill-Annex Mine State Park; appropriating money.

The bill was read for the first time and referred to the Committee on Ways and Means.

Marquart, Fabian and Backer introduced:

H. F. No. 1700, A bill for an act relating to environment; modifying requirements for remote sugar beet storage; amending Minnesota Statutes 2018, section 115.03, by adding a subdivision.

The bill was read for the first time and referred to the Committee on Environment and Natural Resources Policy.

Pinto introduced:

H. F. No. 1701, A bill for an act relating to human services; modifying day care initial licensure requirement; directing commissioner of human services to implement a child care provider communication process, develop a plain-language handbook, and develop a uniform family day care provider application; modifying child care tax credits; requiring a report; appropriating money; amending Minnesota Statutes 2018, sections 245A.04, by adding subdivisions; 290.067, subdivision 1; repealing Minnesota Rules, part 9502.0335, subpart 5.

The bill was read for the first time and referred to the Committee on Ways and Means.

Fabian introduced:

H. F. No. 1702, A bill for an act relating to natural resources; modifying eligibility for provisional firearms safety certificates; amending Minnesota Statutes 2018, sections 97B.015, subdivision 6; 97B.1055.

The bill was read for the first time and referred to the Committee on Environment and Natural Resources Policy.

Richardson; Hansen; Xiong, J.; Gomez and Urdahl introduced:

H. F. No. 1703, A bill for an act relating to human services; providing increased child care assistance to low-income workers to enable higher-quality early childhood care and education; increasing child care assistance reimbursement rates; forecasting the basic sliding fee child care assistance program; amending Minnesota Statutes 2018, sections 119B.02, subdivisions 1, 2; 119B.03, subdivisions 3, 9, 10; 119B.035, subdivisions 1, 2, 4, 5; 119B.05, subdivision 5; 119B.08, subdivision 3; 119B.09, subdivision 7; 119B.10; 119B.11, subdivision 1; 119B.12, subdivision 2; 119B.13, subdivision 1; 119B.15; 119B.24; repealing Minnesota Statutes 2018, sections 119B.011, subdivisions 20, 20a; 119B.03, subdivisions 1, 2, 4, 5, 6, 6a, 6b, 8; 119B.05, subdivision 1; 119B.09, subdivisions 3, 4a; 119B.11, subdivision 4.

The bill was read for the first time and referred to the Committee on Ways and Means.

Liebling, Schultz, Morrison, Zerwas, Baker and Theis introduced:

H. F. No. 1704, A bill for an act relating to health; modifying a provision for residency programs; amending Minnesota Statutes 2018, section 144.1506, subdivision 2.

The bill was read for the first time and referred to the Committee on Ways and Means.

Schultz, Haley, Schomacker, Hamilton, Franson and Gruenhagen introduced:

H. F. No. 1705, A bill for an act relating to health insurance; requesting the legislative auditor to study and report on disparities in certain health insurance rates; appropriating money.

The bill was read for the first time and referred to the Committee on Government Operations.

Lippert, Hansen, Torkelson, Fischer and Persell introduced:

H. F. No. 1706, A bill for an act relating to natural resources; specifying duties and services of soil and water conservation districts; proposing coding for new law in Minnesota Statutes, chapter 103C.

The bill was read for the first time and referred to the Committee on Environment and Natural Resources Policy.

Freiberg introduced:

H. F. No. 1707, A bill for an act relating to public safety; interpreting a term in an administrative rule.

The bill was read for the first time and referred to the Public Safety and Criminal Justice Reform Finance and Policy Division.

Sundin introduced:

H. F. No. 1708, A bill for an act relating to natural resources; governing complaints related to permits to mine or process aggregate resources and withholding of certain state-aid funds; amending Minnesota Statutes 2018, sections 162.07, by adding a subdivision; 162.081, by adding a subdivision; 162.13, by adding a subdivision; 162.145, by adding a subdivision; proposing coding for new law in Minnesota Statutes, chapter 84.

The bill was read for the first time and referred to the Committee on Environment and Natural Resources Policy.

Hansen and Bierman introduced:

H. F. No. 1709, A bill for an act relating to environment; transferring money to metropolitan landfill contingency action trust account.

The bill was read for the first time and referred to the Committee on Ways and Means.

Fabian introduced:

H. F. No. 1710, A bill for an act relating to commerce; prohibiting the use of appropriated funds to support certain legal proceedings.

The bill was read for the first time and referred to the Committee on Commerce.

Youakim introduced:

H. F. No. 1711, A bill for an act relating to education; superintendents; making various nonsubstantive style and form changes; amending Minnesota Statutes 2018, section 123B.143, subdivision 1.

The bill was read for the first time and referred to the Committee on Education Policy.

Davnie introduced:

H. F. No. 1712, A bill for an act relating to liquor; allowing limited self-distribution for commercial wineries; amending Minnesota Statutes 2018, section 340A.301, subdivision 9.

The bill was read for the first time and referred to the Committee on Commerce.

Morrison introduced:

H. F. No. 1713, A bill for an act relating to natural resources; modifying application of protections for threatened and endangered species; amending Minnesota Statutes 2018, section 84.0895, subdivision 2.

The bill was read for the first time and referred to the Committee on Environment and Natural Resources Policy.

Xiong, J.; Lillie; Moller; Xiong, T., and Zerwas introduced:

H. F. No. 1714, A bill for an act relating to local government; eliminating the Ramsey County Community Corrections Department; repealing Minnesota Statutes 2018, section 383A.404.

The bill was read for the first time and referred to the Committee on Government Operations.

Daudt, Swedzinski, Neu, Albright and Erickson introduced:

H. F. No. 1715, A bill for an act relating to public safety; regulating the manufacture, sale, and use of fireworks; dedicating a portion of revenues from the sale of certain fireworks for public safety purposes; amending Minnesota Statutes 2018, sections 297A.94; 624.20, subdivision 1.

The bill was read for the first time and referred to the Public Safety and Criminal Justice Reform Finance and Policy Division.

Richardson, Bennett, Kresha and Kunesh-Podein introduced:

H. F. No. 1716, A bill for an act relating to child protection; requiring social service agencies to assist youth in foster care to obtain drivers' licenses; requiring the Minnesota automobile insurance plan to cover youth in long-term foster care at no cost; amending Minnesota Statutes 2018, sections 65B.10; 260C.219.

The bill was read for the first time and referred to the Committee on Health and Human Services Policy.

Dehn introduced:

H. F. No. 1717, A bill for an act relating to corrections; amending life without release for juveniles; amending Minnesota Statutes 2018, sections 244.05, subdivisions 4, 5; 609.106, subdivision 2, by adding a subdivision; 609.3455, subdivision 2.

The bill was read for the first time and referred to the Public Safety and Criminal Justice Reform Finance and Policy Division.

Baker and Olson introduced:

H. F. No. 1718, A bill for an act relating to health; adding and modifying definitions; changing licensing requirements for businesses regulated by Board of Pharmacy; clarifying requirements for compounding; allowing compounding for veterinary office use in certain situations; clarifying grounds for disciplinary action; prohibiting certain interactions between practitioners and pharmacists and pharmacies; requiring disclosure of certain interactions between veterinarians and pharmacists and pharmacies; changing provisions related to the manufacture and wholesale distribution of drugs; repealing obsolete language; amending Minnesota Statutes 2018, sections 151.01, subdivisions 31, 35, by adding subdivisions; 151.06, subdivision 1; 151.065, subdivisions 1, 3, 6; 151.071, subdivision 2; 151.072, subdivision 3; 151.15, subdivisions 1, 2, 3, by adding subdivisions; 151.18; 151.19, subdivisions 1, 3; 151.211, subdivision 2; 151.22; 151.252, subdivisions 1, 1a, 3; 151.253, subdivision 2, by adding subdivisions; 151.26, subdivision 1, by adding a subdivision; 151.32; 151.37, subdivision 2; 151.40, subdivisions 1, 2;

151.43; 151.46; 151.47, subdivision 1, by adding a subdivision; 152.01, by adding a subdivision; 152.11, subdivisions 1, 1a, 2; 152.13; 295.50, subdivision 14, by adding subdivisions; proposing coding for new law in Minnesota Statutes, chapters 62Q; 151; repealing Minnesota Statutes 2018, sections 151.13, subdivision 2; 151.19, subdivision 4; 151.27; 151.42; 151.44; 151.49; 151.50; 151.51; 151.55; Minnesota Rules, part 6800.1600.

The bill was read for the first time and referred to the Committee on Commerce.

Noor; Moran; Xiong, J.; Cantrell; Olson; Kunesh-Podein; Hassan and Dehn introduced:

H. F. No. 1719, A bill for an act relating to human services; modifying drug testing provisions for MFIP and general assistance; amending Minnesota Statutes 2018, sections 256D.024, subdivision 1; 256J.26, subdivision 1; 609B.425, subdivision 2; 609B.435, subdivision 2.

The bill was read for the first time and referred to the Committee on Health and Human Services Policy.

Becker-Finn; Hansen; Persell; Acomb; Lislegard; Xiong, J.; Lee; Gomez; Her; Vang; Brand; Morrison; Sandell; Fischer; Poston; Carlson, L.; Ecklund and Lillie introduced:

H. F. No. 1720, A bill for an act relating to natural resources; appropriating money for chronic wasting disease adopt-a-dumpster program and certain guidelines; requiring a report.

The bill was read for the first time and referred to the Committee on Ways and Means.

Theis introduced:

H. F. No. 1721, A bill for an act relating to public safety; requiring commissioner of public safety to seek a federal waiver from passenger endorsement requirements on commercial driver's license.

The bill was read for the first time and referred to the Transportation Finance and Policy Division.

Theis introduced:

H. F. No. 1722, A bill for an act relating to mass transit; requiring initiation of negotiations to extend and modify Northstar Commuter Rail passenger service.

The bill was read for the first time and referred to the Transportation Finance and Policy Division.

Claflin and Jurgens introduced:

H. F. No. 1723, A bill for an act relating to Mississippi River Parkway Commission; modifying commission member terms; repealing the commission expiration date; modifying trunk highway fund appropriations; amending Minnesota Statutes 2018, sections 161.1419, subdivision 2; 161.20, subdivision 3; repealing Minnesota Statutes 2018, section 161.1419, subdivision 8.

The bill was read for the first time and referred to the Committee on Government Operations.

Zerwas, Albright, Schomacker and Franson introduced:

H. F. No. 1724, A bill for an act relating to human services; extending child care assistance program eligibility restrictions; amending Minnesota Statutes 2018, section 119B.09, subdivision 9; repealing Minnesota Statutes 2018, section 119B.09, subdivision 9a.

The bill was read for the first time and referred to the Early Childhood Finance and Policy Division.

Albright, Pryor and Pierson introduced:

H. F. No. 1725, A bill for an act relating to health; expanding grants for primary care residency programs; amending Minnesota Statutes 2018, section 144.1506, subdivision 2.

The bill was read for the first time and referred to the Committee on Health and Human Services Policy.

Bernardy, Winkler, Bierman, Hornstein, Becker-Finn, Dehn, Wolgamott and Vang introduced:

H. F. No. 1726, A bill for an act relating to health insurance; establishing supply requirements for prescription contraceptives; requiring health plans to cover contraceptive methods, sterilization, and related medical services, patient education, and counseling; establishing accommodations for eligible organizations; amending Minnesota Statutes 2018, section 256B.0625, subdivision 13; proposing coding for new law in Minnesota Statutes, chapter 62Q.

The bill was read for the first time and referred to the Committee on Commerce.

Koznick, Howard, Elkins and Richardson introduced:

H. F. No. 1727, A bill for an act relating to motor vehicles; authorizing use of consular identification card as primary document for vehicle title registration; amending Minnesota Statutes 2018, section 168A.085, by adding a subdivision.

The bill was read for the first time and referred to the Transportation Finance and Policy Division.

Fabian introduced:

H. F. No. 1728, A bill for an act relating to natural resources; allowing investment of financial assurance money; establishing natural resources damages account; appropriating money; amending Minnesota Statutes 2018, section 116.155, subdivision 1, by adding a subdivision; proposing coding for new law in Minnesota Statutes, chapters 11A; 115B.

The bill was read for the first time and referred to the Committee on Ways and Means.

Hertaus introduced:

H. F. No. 1729, A bill for an act relating to waters; modifying authority of Lake Minnetonka Conservation District; amending Minnesota Statutes 2018, section 103B.611, subdivision 3.

The bill was read for the first time and referred to the Committee on Environment and Natural Resources Policy.

Huot introduced:

H. F. No. 1730, A bill for an act relating to taxation; individual income; expanding the subtraction for military retirement pay; amending Minnesota Statutes 2018, section 290.0132, subdivision 21.

The bill was read for the first time and referred to the Committee on Taxes.

Daudt introduced:

H. F. No. 1731, A bill for an act relating to veterinary medicine; establishing a veterinary prescription monitoring program; prohibiting veterinary prescriptions for controlled substances in certain circumstances; requiring registration and data submission; providing liability immunity; appropriating money; amending Minnesota Statutes 2018, sections 156.16, by adding subdivisions; 156.18, subdivision 1; proposing coding for new law in Minnesota Statutes, chapter 156.

The bill was read for the first time and referred to the Committee on Ways and Means.

MOTIONS AND RESOLUTIONS

Kunesh-Podein moved that the names of Bernardy and Hausman be added as authors on H. F. No. 13. The motion prevailed.

Jurgens moved that the name of Mann be added as an author on H. F. No. 55. The motion prevailed.

Brand moved that the name of Gunther be added as an author on H. F. No. 85. The motion prevailed.

Schultz moved that the names of Bernardy and Becker-Finn be added as authors on H. F. No. 90. The motion prevailed.

Sundin moved that the name of Bernardy be added as an author on H. F. No. 129. The motion prevailed.

Huot moved that the name of Nornes be added as an author on H. F. No. 148. The motion prevailed.

Becker-Finn moved that the names of Richardson and Tabke be added as authors on H. F. No. 229. The motion prevailed.

Poppe moved that the names of Urdahl, Daniels, Demuth, Fabian and Backer be added as authors on H. F. No. 232. The motion prevailed.

Kunesh-Podein moved that the name of Masin be added as an author on H. F. No. 247. The motion prevailed.

Koegel moved that the name of Ecklund be added as an author on H. F. No. 263. The motion prevailed.

Runbeck moved that the name of Moller be added as an author on H. F. No. 297. The motion prevailed.

Becker-Finn moved that the names of Lillie and Tabke be added as authors on H. F. No. 305. The motion prevailed.

Drazkowski moved that the names of Runbeck and Anderson be added as authors on H. F. No. 352. The motion prevailed.

Carlson, L., moved that the name of Albright be added as an author on H. F. No. 354. The motion prevailed.

Poppe moved that the name of Mann be added as an author on H. F. No. 436. The motion prevailed.

Morrison moved that the names of Stephenson and Elkins be added as authors on H. F. No. 440. The motion prevailed.

Franson moved that the name of West be added as an author on H. F. No. 445. The motion prevailed.

Franson moved that the name of West be added as an author on H. F. No. 498. The motion prevailed.

Becker-Finn moved that the names of Lillie and Tabke be added as authors on H. F. No. 553. The motion prevailed.

Lien moved that the names of Kresha, Bierman and Robbins be added as authors on H. F. No. 578. The motion prevailed.

Hausman moved that the name of Drazkowski be added as an author on H. F. No. 589. The motion prevailed.

Edelson moved that the name of Halverson be added as an author on H. F. No. 593. The motion prevailed.

Hassan moved that the name of Scott be added as an author on H. F. No. 606. The motion prevailed.

Wolgamott moved that the name of Pierson be added as an author on H. F. No. 622. The motion prevailed.

Pinto moved that the name of Robbins be added as an author on H. F. No. 627. The motion prevailed.

Morrison moved that the name of Bernardy be added as an author on H. F. No. 679. The motion prevailed.

Tabke moved that the names of Poppe, Long and Moller be added as authors on H. F. No. 681. The motion prevailed.

Lesch moved that the name of Robbins be added as an author on H. F. No. 707. The motion prevailed.

Lee moved that the names of Carlson, L.; Dehn; Wolgamott and Koegel be added as authors on H. F. No. 721. The motion prevailed.

Mann moved that the name of Moller be added as an author on H. F. No. 728. The motion prevailed.

Franson moved that the name of Koznick be added as an author on H. F. No. 790. The motion prevailed.

Richardson moved that the name of Moller be added as an author on H. F. No. 813. The motion prevailed.

Kunesh-Podein moved that the name of Schultz be added as an author on H. F. No. 824. The motion prevailed.

Halverson moved that the name of Moller be added as an author on H. F. No. 831. The motion prevailed.

Hansen moved that the names of Richardson and Tabke be added as authors on H. F. No. 850. The motion prevailed.

Quam moved that the name of Heinrich be added as an author on H. F. No. 855. The motion prevailed.

Wazlawik moved that the name of Bierman be added as an author on H. F. No. 880. The motion prevailed.

Morrison moved that the names of Poppe and Long be added as authors on H. F. No. 909. The motion prevailed.

Mahoney moved that the name of Pierson be added as an author on H. F. No. 914. The motion prevailed.

Kunesh-Podein moved that the name of Bierman be added as an author on H. F. No. 916. The motion prevailed.

Koegel moved that the name of Bernardy be added as an author on H. F. No. 955. The motion prevailed.

Marquart moved that the name of Poppe be added as an author on H. F. No. 965. The motion prevailed.

Jurgens moved that his name be stricken as an author on H. F. No. 970. The motion prevailed.

Elkins moved that the name of Huot be added as an author on H. F. No. 983. The motion prevailed.

Becker-Finn moved that the names of Richardson and Moller be added as authors on H. F. No. 984. The motion prevailed.

Bernardy moved that the name of Stephenson be added as an author on H. F. No. 988. The motion prevailed.

Backer moved that the name of Green be added as an author on H. F. No. 999. The motion prevailed.

Zerwas moved that the name of Theis be added as an author on H. F. No. 1000. The motion prevailed.

Lesch moved that the name of Bierman be added as an author on H. F. No. 1053. The motion prevailed.

Zerwas moved that the name of West be added as an author on H. F. No. 1110. The motion prevailed.

Fabian moved that the name of Kiel be added as chief author on H. F. No. 1131. The motion prevailed.

Morrison moved that the names of Poppe and Long be added as authors on H. F. No. 1167. The motion prevailed.

Bahner moved that the names of Poppe and Long be added as authors on H. F. No. 1226. The motion prevailed.

Ecklund moved that his name be stricken as an author on H. F. No. 1278. The motion prevailed.

Baker moved that the name of Scott be added as an author on H. F. No. 1306. The motion prevailed.

Scott moved that the name of Runbeck be added as an author on H. F. No. 1312. The motion prevailed.

Morrison moved that the name of Pryor be added as an author on H. F. No. 1343. The motion prevailed.

Kunesh-Podein moved that the name of Lee be added as an author on H. F. No. 1346. The motion prevailed.

Koegel moved that the name of Lee be added as an author on H. F. No. 1353. The motion prevailed.

Her moved that the names of Lillie, Tabke and Lee be added as authors on H. F. No. 1362. The motion prevailed.

Huot moved that the name of Lee be added as an author on H. F. No. 1363. The motion prevailed.

Erickson moved that the name of Mariani be added as an author on H. F. No. 1370. The motion prevailed.

Hansen moved that the name of Lee be added as an author on H. F. No. 1374. The motion prevailed.

Lee moved that the name of Bierman be added as an author on H. F. No. 1403. The motion prevailed.

Baker moved that the names of Daniels and Poston be added as authors on H. F. No. 1411. The motion prevailed.

Poppe moved that the name of Poston be added as an author on H. F. No. 1417. The motion prevailed.

Poppe moved that the name of Poston be added as an author on H. F. No. 1418. The motion prevailed.

Poppe moved that the name of Poston be added as an author on H. F. No. 1419. The motion prevailed.

Baker moved that the name of Demuth be added as an author on H. F. No. 1422. The motion prevailed.

Fabian moved that the name of Vogel be added as an author on H. F. No. 1433. The motion prevailed.

Lislegard moved that the name of Lueck be added as an author on H. F. No. 1435. The motion prevailed.

Heintzeman moved that the name of Poston be added as an author on H. F. No. 1450. The motion prevailed.

Lesch moved that the name of Christensen be added as an author on H. F. No. 1463. The motion prevailed.

Bierman moved that the name of Lueck be added as an author on H. F. No. 1471. The motion prevailed.

Urdahl moved that the name of Lueck be added as an author on H. F. No. 1482. The motion prevailed.

Franson moved that the name of Runbeck be added as an author on H. F. No. 1488. The motion prevailed.

Urdahl moved that the name of Lueck be added as an author on H. F. No. 1489. The motion prevailed.

Kunesh-Podein moved that the names of Moller and Christensen be added as authors on H. F. No. 1494. The motion prevailed.

Fischer moved that the name of Moller be added as an author on H. F. No. 1502. The motion prevailed.

Becker-Finn moved that the name of Lueck be added as an author on H. F. No. 1503. The motion prevailed.

Fabian moved that the names of Albright and Theis be added as authors on H. F. No. 1515. The motion prevailed.

Fabian moved that the names of Albright, Theis and Lueck be added as authors on H. F. No. 1519. The motion prevailed.

Sandstede moved that the name of Mariani be added as an author on H. F. No. 1520. The motion prevailed.

Edelson moved that the name of Cantrell be added as an author on H. F. No. 1522. The motion prevailed.

Mekeland moved that the name of Tabke be added as an author on H. F. No. 1527. The motion prevailed.

Poppe moved that the name of Poston be added as an author on H. F. No. 1530. The motion prevailed.

Liebling moved that the name of Sandell be added as an author on H. F. No. 1540. The motion prevailed.

Zerwas moved that the name of Demuth be added as an author on H. F. No. 1541. The motion prevailed.

Richardson moved that the name of Moran be added as an author on H. F. No. 1542. The motion prevailed.

Youakim moved that the name of Christensen be added as an author on H. F. No. 1559. The motion prevailed.

Sandell moved that the name of West be added as an author on H. F. No. 1572. The motion prevailed.

Wolgamott moved that the name of Theis be added as an author on H. F. No. 1577. The motion prevailed.

Nornes moved that the names of Franson and Poston be added as authors on H. F. No. 1579. The motion prevailed.

Poppe moved that the name of Poston be added as an author on H. F. No. 1581. The motion prevailed.

Haley moved that her name be stricken as an author on H. F. No. 1594. The motion prevailed.

Lesch moved that H. F. No. 1236 be recalled from the Public Safety and Criminal Justice Reform Finance and Policy Division and be re-referred to the Judiciary Finance and Civil Law Division. The motion prevailed.

Cantrell moved that H. F. No. 1523 be recalled from the Committee on Health and Human Services Policy and be re-referred to the Committee on Commerce. The motion prevailed.

Kunesh-Podein moved that H. F. No. 1566 be recalled from the Committee on Ways and Means and be re-referred to the Committee on Education Policy. The motion prevailed.

Freiberg moved that H. F. No. 758, now on the General Register, be re-referred to the Committee on Government Operations. The motion prevailed.

ADJOURNMENT

Winkler moved that when the House adjourns today it adjourn until 12:00 noon, Wednesday, February 27, 2019. The motion prevailed.

Winkler moved that the House adjourn. The motion prevailed, and the Speaker declared the House stands adjourned until 12:00 noon, Wednesday, February 27, 2019.

PATRICK D. MURPHY, Chief Clerk, House of Representatives